

DATE 12/13/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022587

APPLICANT TINA PRIZAMENT PHONE 352 514-3600
ADDRESS 16304 NW 200TH WAY HIGH SPRINGS FL 32643
OWNER ROYALE CUSTOM HOMES PHONE 352 514-3600
ADDRESS 6314 SW CR 18 FT. WHITE FL 32038
CONTRACTOR ROYALE CUSTOM HOMES PHONE 352 514-3600
LOCATION OF PROPERTY 47S, TL ON 27, TL ON CR 18, 1ST ON RIGHT

TYPE DEVELOPMENT SFD, UTILITY ESTIMATED COST OF CONSTRUCTION 72500.00
HEATED FLOOR AREA 1450.00 TOTAL AREA 2265.00 HEIGHT .00 STORIES 1
FOUNDATION CONC WALLS FRAMED ROOF PITCH 7/12 FLOOR SLAB
LAND USE & ZONING FT WHITE MAX. HEIGHT 20
Minimum Set Back Requirements: STREET-FRONT REAR SIDE
NO. EX.D.U. 0 FLOOD ZONE FW DEVELOPMENT PERMIT NO. _____

PARCEL ID 34-6S-16-04059-503 SUBDIVISION FT WHITE OAKS
LOT 3 BLOCK PHASE UNIT TOTAL ACRES 1.14

Culvert Permit No. CRC1326315 Culvert Waiver 04-1109-N Contractor's License Number BK
Applicant/Owner/Contractor JK Y
FT WHITE 04-1109-N BK
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD, NOC ON FILE

Check # or Cash 4349

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 _____ Rough-in plumbing above slab and below wood floor _____
date/app. by date/app. by
Electrical rough-in _____ Heat & Air Duct _____ Peri. beam (Lintel) _____
date/app. by date/app. by date/app. by
Permanent power _____ C.O. Final _____ Culvert _____
date/app. by date/app. by date/app. by
M/H tie downs, blocking, electricity and plumbing _____ Pool _____
date/app. by date/app. by
Reconnection _____ Pump pole _____ Utility Pole _____
date/app. by date/app. by date/app. by
M/H Pole _____ Travel Trailer _____ Re-roof _____
date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 365.00 CERTIFICATION FEE \$ 11.33 SURCHARGE FEE \$ 11.33
MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ _____ WASTE FEE \$ _____
FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ _____ TOTAL FEE 437.66
INSPECTORS OFFICE [Signature] 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."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVENIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

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

For Office Use Only Application # 0411-66 Date Received 11/16/04 By JPW Permit # 22587
Application Approved by - Zoning Official _____ Date _____ Plans Examiner _____ Date _____
Flood Zone _____ Development Permit _____ Zoning _____ Land Use Plan Map Category _____
Comments EN HEALTH DRAINAGE PLAN

Applicants Name Tina Prizament Phone 352-514 3600
Address 16304 NW 208th Way
Owners Name SAME 6318 Phone 386 454 0975
911 Address 2000 SW CR 18, Ft. White 32038
Contractors Name ROYALE CUSTOM HOMES INC. TINA PRIZAMENT Phone 352 514 3600
Address SAME
Fee Simple Owner Name & Address ROYALE CUSTOM HOME
Bonding Co. Name & Address N/A
Architect/Engineer Name & Address MARTY ESTURIDGE
Mortgage Lenders Name & Address MILLENNIUM BANK, GAINESVILLE FL.
Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Energy
Property ID Number 34 6S 16 04059 S03 Estimated Cost of Construction \$80,000
Subdivision Name FT WHITE OAKS Lot 3 Block _____ Unit _____ Phase _____
Driving Directions NORTH ON 27th WEST ON RIGHT AT CR 18
IN FORT WHITE PROPERTY IMMEDIATELY ON RIGHT
SEE LARGE SIGN
Type of Construction FRAME SFD Number of Existing Dwellings on Property 0
Total Acreage 1.14 Lot Size 160'x578' Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
Actual Distance of Structure from Property Lines - Front 80 Side 52 Side 53 Rear 389
Total Building Height 0 Number of Stories 1 Heated Floor Area 1450 Roof Pitch 7/12

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction.

OWNERS AFFIDAVIT: 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.

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

Owner Builder or Agent (Including Contractor) _____

STATE OF FLORIDA
COUNTY OF COLUMBIA

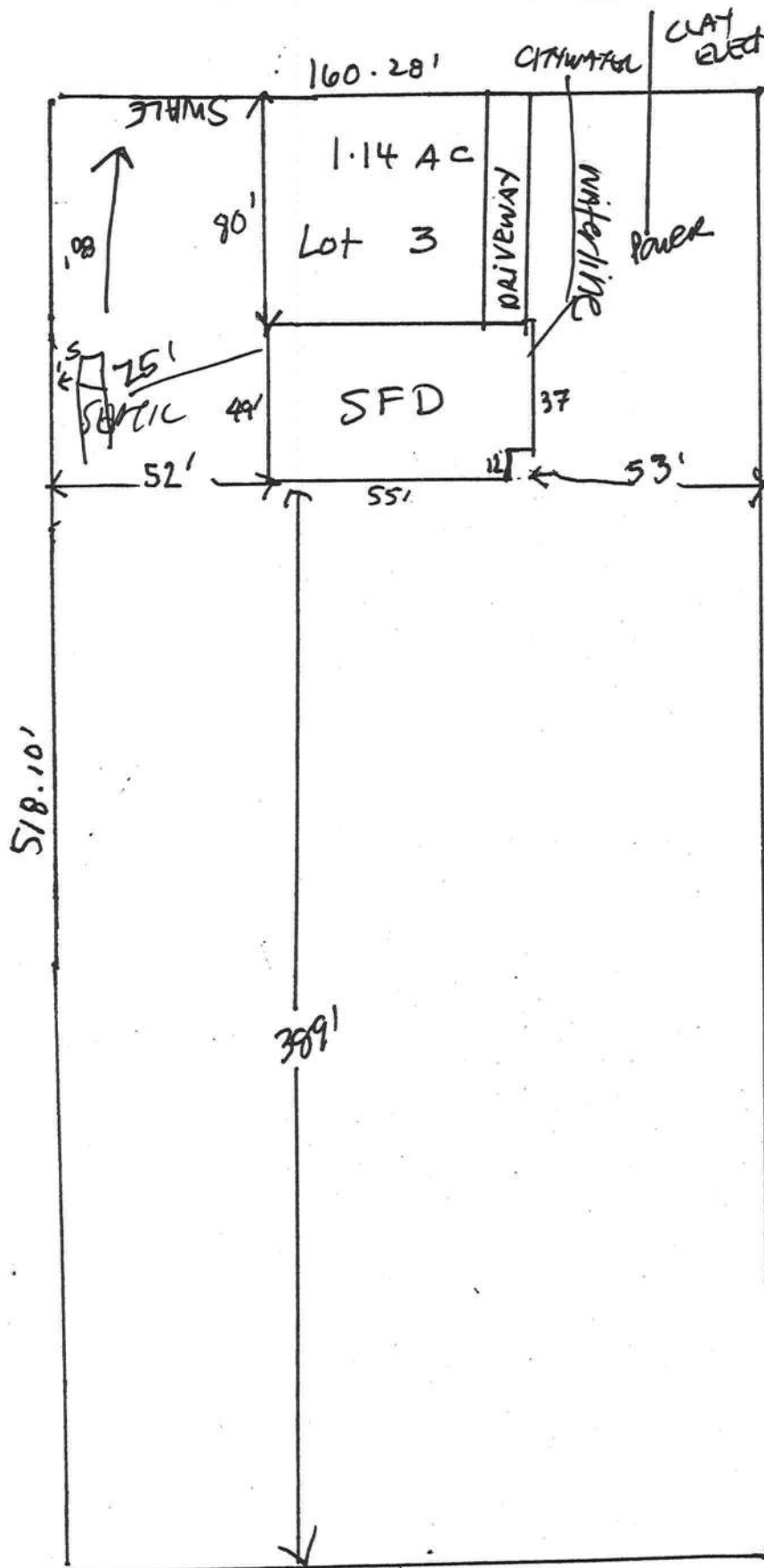
Sworn to (or affirmed) and subscribed before me
this _____ day of _____ 20____.
Personally known _____ or Produced Identification _____

Contractor Signature _____
Contractors License Number _____
Competency Card Number _____
NOTARY STAMP/SEAL CRC1326315

Notary Signature _____

CR N18

04-1109-N



COMMERCIAL LOT.

Approved -
Shaddy
ES1-COLUMBIA
11-19-04

[Signature] owner 11/16/04



34-6S-16-04059-503

Columbia County Property Appraiser

Owner & Property Info

Owner's Name	COOK REAL ESTATE INVESTMENTS
Site Address	
Mailing Address	P O BOX 102 FT WHITE, FL 32038
Brief Legal	LOT 3 FORT WHITE OAKS REPLAT. ORB 757-467, 951-1805.

Show: [Tax Info](#) | [GIS Map](#) | [Property Card](#)

Use Desc. (code)	VACANT (000000)
Neighborhood	16.00
Tax District	4
UD Codes	
Market Area	02
Total Land Area	1.140 ACRES

Property & Assessment Values

Mkt Land Value	cnt: (1)	\$11,700.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$11,700.00

Just Value	\$11,700.00
Class Value	\$0.00
Assessed Value	\$11,700.00
Exempt Value	\$0.00
Total Taxable Value	\$11,700.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
4/16/2002	951/1805	WD	V	Q		\$12,000.00
2/7/1992	757/467	WD	V	U	35	\$13,500.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000000	VAC RES (MKT)	1.000 LT - (1.140AC)	1.00/1.00/1.30/1.00	\$11,700.00	\$11,700.00

Columbia County Property Appraiser

ACORD CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 11/15/2004
PRODUCER (352)796-1451 FAX (352)799-5986 Killingsworth Agency, Inc. 19259 Cortez Blvd. P. O. Box 1750 Brooksville, FL 34605-1750		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURED Royal Custom Homes, Inc. 14504 NW 193rd St Alachua, FL 32615		INSURERS AFFORDING COVERAGE INSURER A: Mid-Continent Casualty Co. INSURER B: INSURER C: INSURER D: INSURER E:
		NAIC #

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	04GL000561849	09/09/2004	09/09/2005	EACH OCCURRENCE	\$ 300,000
	DAMAGE TO RENTED PREMISES (Ea occurrence)				\$ 100,000	
	MED EXP (Any one person)				\$ Excluded	
	PERSONAL & ADV INJURY				\$ 300,000	
	GENERAL AGGREGATE				\$ 600,000	
	GEN. AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				PRODUCTS - COMP/CP AGG	\$ 600,000
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident)	\$
					BODILY INJURY (Per person)	\$
					BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE (Per accident)	\$
	GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
					OTHER THAN AUTO ONLY EA ACC AGG	\$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				EACH OCCURRENCE	\$
					AGGREGATE	\$
						\$
						\$
						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS	OT-ER
					E L EACH ACCIDENT	\$
					E L DISEASE - EA EMPLOYEE	\$
					E L DISEASE - POLICY LIMIT	\$
	OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

LIMITS SHOWN ARE THOSE IN EFFECT AT POLICY INCEPTION DATE.

CERTIFICATE HOLDER**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

Columbia County Building and Zoning

AUTHORIZED REPRESENTATIVE
Vicki Parrish/VICKI*Vicki L. Parrish*

ACORD 25 (2001/08) FAX: (386)758-2160

©ACORD CORPORATION 1988

WARRANTY DEED

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

This document prepared by and to be returned to:

Gary D. Grunder

Grunder & Petteway, P. A.

23349 NW CR 236, Suite 10

High Springs, Florida, 32643

Inst:2004024537 Date:11/02/2004 Time:14:41

Doc Stamp-Deed : 126.00

MK DC, P. Dewitt Cason, Columbia County B:1029 P:1721

Tax Parcel Number:

R04059-503

THIS INDENTURE made October 28, 2004,

BETWEEN Cook Real Estate Investments, Inc., whose post office address is P.O. Box 102, Ft. White, Florida, 32038, herein called Grantor, and

Royale Custom Homes, Inc., whose post office address is P.O. Box 2179, High Springs, Florida, 32655, herein called Grantee,

Witnesseth that said grantor, for and in consideration of the sum of TEN AND NO/100 (\$10.00) Dollars, 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 the county(ies) of Columbia and Columbia and Columbia state of Florida, to wit:

Lot 3, Fort White Oaks Replat, A subdivision according to Plat thereof recorded in Plat Book 6, Page 41, Public Records of Columbia County, Florida.

AND SAID GRANTOR does hereby fully warrant the title to said land, and will defend the same against the 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.

Signed, sealed and delivered in our presence:

Cook Real Estate Investments, Inc.

Julie L. Hause
Julie L. Hause

Print name

Beth

Print name

Gary D. Grunder

By: Donald W. Cook Jr.
Donald W. Cook, Jr., President

(Corporate Seal)

State of Florida
County of Alachua

The foregoing instrument was acknowledged before me this 28 day of October, 2004 by Donald W. Cook, Jr. as President who

- () is/are personally known to me
(☒) produced a current Florida driver's license as identification
() produced _____ as identification

Beth
Notary Public at Large, State of Florida
(SEAL)
7592



Town of Fort White

Post Office Box 129 ♦ Fort White, Florida 32038-0129 ♦ 386-497-2321 ♦ FAX 386-497-4946

CERTIFICATE OF COMPLIANCE & REQUEST FOR ISSUANCE OF BUILDING PERMIT

The undersigned hereby certify the following property is in compliance with the Town of Fort
White's Comprehensive Plan and Land Development Regulations for the stated development purposes:

OWNER'S NAME: TINA PRIZAMENT

ADDRESS: 16304 N.W. 208th Way, High Springs, FL 32643

PROPERTY DESCRIPTION: LOT 3 FORT WHITE OAKS, FORT WHITE, FL
(parcel number if possible)

DEVELOPMENT: FORT WHITE OAKS

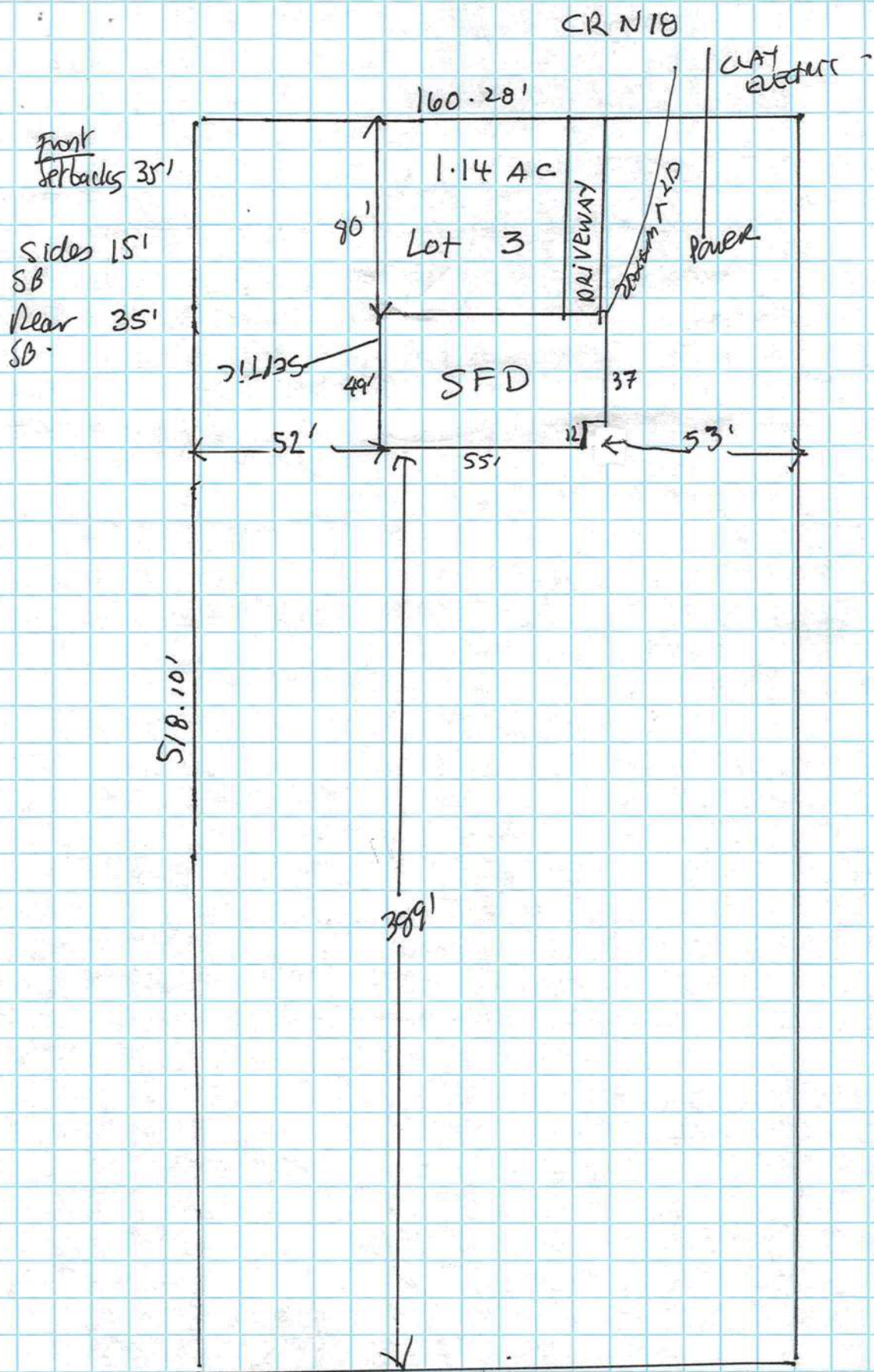
You are hereby authorized to issue the appropriate building permits.

10-26-04

DATE


LAND DEVELOPMENT REGULATION
ADMINISTRATOR
TOWN OF FORT WHITE

Equal Opportunity Employer



6318 SW
CR 18
FT WHITE FL
32038

FLORIDA ENERGY EFFICIENCY CODE
FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name:	Royale- Ft. White Model	Builder:	
Address:		Permitting Office:	
City, State:	,	Permit Number:	22587
Owner:	Royale Homes	Jurisdiction Number:	221000
Climate Zone:	North		

1. New construction or existing	New	12. Cooling systems	
2. Single family or multi-family	Single family	a. Central Unit	Cap: 30.0 kBtu/hr
3. Number of units, if multi-family	1		SEER: 10.00
4. Number of Bedrooms	3	b. N/A	
5. Is this a worst case?	Yes	c. N/A	
6. Conditioned floor area (ft²)	1450 ft²		
7. Glass area & type	Single Pane Double Pane	13. Heating systems	
a. Clear glass, default U-factor	0.0 ft² 141.7 ft²	a. Electric Heat Pump	Cap: 30.0 kBtu/hr
b. Default tint, default U-factor	0.0 ft² 0.0 ft²		HSPF: 7.25
c. Labeled U-factor or SHGC	0.0 ft² 0.0 ft²	b. N/A	
8. Floor types		c. N/A	
a. Slab-On-Grade Edge Insulation	R=0.0, 187.0(p) ft	14. Hot water systems	
b. N/A		a. Electric Resistance	Cap: 40.0 gallons
c. N/A			EF: 0.89
9. Wall types		b. N/A	
a. Frame, Wood, Exterior	R=13.0, 1208.0 ft²	c. Conservation credits	
b. Frame, Wood, Adjacent	R=13.0, 288.0 ft²	(HR-Heat recovery, Solar	
c. N/A		DHP-Dedicated heat pump)	
d. N/A		15. HVAC credits	
e. N/A		(CF-Ceiling fan, CV-Cross ventilation,	
10. Ceiling types		HF-Whole house fan,	
a. Under Attic	R=30.0, 1122.0 ft²	PT-Programmable Thermostat,	
b. Under Attic	R=30.0, 342.0 ft²	MZ-C-Multizone cooling,	
c. Under Attic	R=19.0, 77.0 ft²	MZ-H-Multizone heating)	
11. Ducts			
a. Sup: Unc. Ret: Unc. AH: Garage	Sup. R=6.0, 168.0 ft		
b. N/A			

Glass/Floor Area: 0.10

Total as-built points: 23458
Total base points: 24219

PASS

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

PREPARED BY: Gale Insulation

DATE: 11/4/04

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


OWNER/AGENT: _____

DATE: _____

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

BUILDING OFFICIAL: _____

DATE: _____



SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES .18 X Conditioned X BSPM = Points Floor Area											
				Type/SC	Overhang Ornt Len Hgt			Area X SPM X SOF = Points			
.18	1450.0	20.04	5230.4	Double, Clear	W	4.0	5.3	45.0	38.52	0.60	1044.0
				Double, Clear	W	4.0	6.5	7.0	38.52	0.66	178.9
				Double, Clear	W	4.0	6.5	10.0	38.52	0.66	255.6
				Double, Clear	S	0.0	0.0	9.0	35.87	1.00	322.8
				Double, Clear	E	1.0	5.5	45.0	42.06	0.96	1820.2
				Double, Clear	E	8.0	3.8	9.0	42.06	0.39	146.1
				Double, Clear	E	8.0	7.0	16.7	42.06	0.48	338.1
				As-Built Total:			141.7			4105.7	
WALL TYPES Area X BSPM = Points				Type		R-Value		Area X SPM = Points			
Adjacent	288.0	0.70	201.6	Frame, Wood, Exterior		13.0		1208.0	1.50		1812.0
Exterior	1208.0	1.70	2053.6	Frame, Wood, Adjacent		13.0		288.0	0.60		172.8
Base Total:	1496.0		2255.2	As-Built Total:			1496.0			1984.8	
DOOR TYPES Area X BSPM = Points				Type		Area X SPM = Points					
Adjacent	20.0	2.40	48.0	Exterior Insulated				26.7	4.10		109.3
Exterior	26.7	6.10	162.7	Adjacent Insulated				20.0	1.60		32.0
Base Total:	46.7		210.7	As-Built Total:			46.7			141.3	
CEILING TYPES Area X BSPM = Points				Type		R-Value		Area X SPM X SCM = Points			
Under Attic	1450.0	1.73	2508.5	Under Attic		30.0		1122.0	1.73 X 1.00		1941.1
				Under Attic		30.0		342.0	1.73 X 1.00		591.7
				Under Attic		19.0		77.0	2.34 X 1.00		180.2
Base Total:	1450.0		2508.5	As-Built Total:			1541.0			2712.9	
FLOOR TYPES Area X BSPM = Points				Type		R-Value		Area X SPM = Points			
Slab	187.0(p)	-37.0	-6919.0	Slab-On-Grade Edge Insulation		0.0		187.0(p)	-41.20		-7704.4
Raised	0.0	0.00	0.0								
Base Total:			-6919.0	As-Built Total:			187.0			-7704.4	
INFILTRATION Area X BSPM = Points				Area X SPM = Points							
	1450.0	10.21	14804.5	1450.0 10.21 14804.5							

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE					AS-BUILT										
Summer Base Points:		18090.3			Summer As-Built Points:					16044.9					
Total Summer Points	X	System Multiplier	=	Cooling Points	Total Component	X	Cap Ratio	X	Duct Multiplier (DM x DSM x AHU)	X	System Multiplier	X	Credit Multiplier	=	Cooling Points
18090.3		0.4266		7717.3	16044.9		1.000		(1.090 x 1.147 x 1.00)		0.341		1.000		6846.4
					16044.9		1.00		1.250		0.341		1.000		6846.4

WINTER CALCULATIONS
Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES .18 X Conditioned X BWPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt			Area X WPM X WOF = Points			
.18	1450.0	12.74	3325.1	Double, Clear	W	4.0	5.3	45.0	20.73	1.13	1058.5
				Double, Clear	W	4.0	6.5	7.0	20.73	1.11	161.0
				Double, Clear	W	4.0	6.5	10.0	20.73	1.11	230.0
				Double, Clear	S	0.0	0.0	9.0	13.30	1.00	119.7
				Double, Clear	E	1.0	5.5	45.0	18.79	1.02	861.3
				Double, Clear	E	8.0	3.8	9.0	18.79	1.46	246.9
				Double, Clear	E	8.0	7.0	16.7	18.79	1.32	415.0
				As-Built Total:							141.7
WALL TYPES Area X BWPM = Points				Type	R-Value		Area X WPM = Points				
Adjacent	288.0	3.60	1036.8	Frame, Wood, Exterior	13.0		1208.0	3.40	4107.2		
Exterior	1208.0	3.70	4469.6	Frame, Wood, Adjacent	13.0		288.0	3.30	950.4		
Base Total: 1496.0 5506.4				As-Built Total:		1496.0		5057.6			
DOOR TYPES Area X BWPM = Points				Type	Area X WPM = Points						
Adjacent	20.0	11.50	230.0	Exterior Insulated			26.7	8.40	224.0		
Exterior	26.7	12.30	328.0	Adjacent Insulated			20.0	8.00	160.0		
Base Total: 46.7 558.0				As-Built Total:		46.7		384.0			
CEILING TYPES Area X BWPM = Points				Type	R-Value		Area X WPM X WCM = Points				
Under Attic	1450.0	2.05	2972.5	Under Attic	30.0		1122.0	2.05 X 1.00	2300.1		
				Under Attic	30.0		342.0	2.05 X 1.00	701.1		
				Under Attic	19.0		77.0	2.70 X 1.00	207.9		
Base Total: 1450.0 2972.5				As-Built Total:		1541.0		3209.1			
FLOOR TYPES Area X BWPM = Points				Type	R-Value		Area X WPM = Points				
Slab	187.0(p)	8.9	1664.3	Slab-On-Grade Edge Insulation	0.0		187.0(p)	18.80	3515.6		
Raised	0.0	0.00	0.0								
Base Total: 1664.3				As-Built Total:		187.0		3515.6			
INFILTRATION Area X BWPM = Points				Area X WPM = Points							
1450.0 -0.59 -855.5				1450.0 -0.59 -855.5							

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT							
Winter Base Points: 13170.9				Winter As-Built Points: 14403.1							
Total Winter Points	X	System Multiplier	= Heating Points	Total Component	X	Cap Ratio	X Duct Multiplier (DM x DSM x AHU)	X System Multiplier	X Credit Multiplier	= Heating Points	
13170.9		0.6274	8263.4	14403.1		1.000	(1.069 x 1.169 x 1.00)	0.470	1.000	8465.7	
				14403.1		1.00	1.250	0.470	1.000	8465.7	

Residential Whole Building Performance Method A - Details

ADDRESS: , , , PERMIT #:

BASE				AS-BUILT						
WATER HEATING										
Number of Bedrooms	X	Multiplier	= Total	Tank Volume	EF	Number of Bedrooms	X	Tank X Ratio	Multiplier X Credit Multiplier	= Total
3		2746.00	8238.0	40.0	0.89	3		1.00	2715.15	1.00 8145.4
				As-Built Total: 8145.4						

CODE COMPLIANCE STATUS											
BASE						AS-BUILT					
Cooling Points	+	Heating Points	+	Hot Water Points	= Total Points	Cooling Points	+	Heating Points	+	Hot Water Points	= Total Points
7717		8263		8238	24219	6846		8466		8145	23458

PASS



Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	606.1.ABC.1.1	Maximum:.3 cfm/sq.ft. window area; .5 cfm/sq.ft. door area.	
Exterior & Adjacent Walls	606.1.ABC.1.2.1	Caulk, gasket, weatherstrip or seal between: windows/doors & frames, surrounding wall; foundation & wall sole or sill plate; joints between exterior wall panels at corners; utility penetrations; between wall panels & top/bottom plates; between walls and floor. EXCEPTION: Frame walls where a continuous infiltration barrier is installed that extends from, and is sealed to, the foundation to the top plate.	
Floors	606.1.ABC.1.2.2	Penetrations/openings >1/8" sealed unless backed by truss or joint members. EXCEPTION: Frame floors where a continuous infiltration barrier is installed that is sealed to the perimeter, penetrations and seams.	
Ceilings	606.1.ABC.1.2.3	Between walls & ceilings; penetrations of ceiling plane of top floor; around shafts, chases, soffits, chimneys, cabinets sealed to continuous air barrier; gaps in gyp board & top plate; attic access. EXCEPTION: Frame ceilings where a continuous infiltration barrier is installed that is sealed at the perimeter, at penetrations and seams.	
Recessed Lighting Fixtures	606.1.ABC.1.2.4	Type IC rated with no penetrations, sealed; or Type IC or non-IC rated, installed inside a sealed box with 1/2" clearance & 3" from insulation; or Type IC rated with < 2.0 cfm from conditioned space, tested.	
Multi-story Houses	606.1.ABC.1.2.5	Air barrier on perimeter of floor cavity between floors.	
Additional Infiltration reqts	606.1.ABC.1.3	Exhaust fans vented to outdoors, dampers; combustion space heaters comply with NFPA, have combustion air.	

6A-22 OTHER PRESCRIPTIVE MEASURES (must be met or exceeded by all residences.)

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	612.1	Comply with efficiency requirements in Table 6-12. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required.	
Swimming Pools & Spas	612.1	Spas & heated pools must have covers (except solar heated). Non-commercial pools must have a pump timer. Gas spa & pool heaters must have a minimum thermal efficiency of 78%.	
Shower heads	612.1	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG.	
Air Distribution Systems	610.1	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated, and installed in accordance with the criteria of Section 610. Ducts in unconditioned attics: R-6 min. insulation.	
HVAC Controls	607.1	Separate readily accessible manual or automatic thermostat for each system.	
Insulation	604.1, 602.1	Ceilings-Min. R-19. Common walls-Frame R-11 or CBS R-3 both sides. Common ceiling & floors R-11.	

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 83.2

The higher the score, the more efficient the home.

Royale Homes, , , ,

1. New construction or existing	New	12. Cooling systems	
2. Single family or multi-family	Single family	a. Central Unit	Cap: 30.0 kBtu/hr
3. Number of units, if multi-family	1		SEER: 10.00
4. Number of Bedrooms	3	b. N/A	
5. Is this a worst case?	Yes	c. N/A	
6. Conditioned floor area (ft ²)	1450 ft ²		
7. Glass area & type	Single Pane Double Pane	13. Heating systems	
a. Clear glass, default U-factor	0.0 ft ² 141.7 ft ²	a. Electric Heat Pump	Cap: 30.0 kBtu/hr
b. Default tint, default U-factor	0.0 ft ² 0.0 ft ²		HSPF: 7.25
c. Labeled U-factor or SHGC	0.0 ft ² 0.0 ft ²	b. N/A	
8. Floor types		c. N/A	
a. Slab-On-Grade Edge Insulation	R=0.0, 187.0(p) ft	14. Hot water systems	
b. N/A		a. Electric Resistance	Cap: 40.0 gallons
c. N/A			EF: 0.89
9. Wall types		b. N/A	
a. Frame, Wood, Exterior	R=13.0, 1208.0 ft ²	c. Conservation credits	
b. Frame, Wood, Adjacent	R=13.0, 288.0 ft ²	(HR-Heat recovery, Solar	
c. N/A		DHP-Dedicated heat pump)	
d. N/A		15. HVAC credits	
e. N/A		(CF-Ceiling fan, CV-Cross ventilation,	
10. Ceiling types		HF-Whole house fan,	
a. Under Attic	R=30.0, 1122.0 ft ²	PT-Programmable Thermostat,	
b. Under Attic	R=30.0, 342.0 ft ²	MZ-C-Multizone cooling,	
c. Under Attic	R=19.0, 77.0 ft ²	MZ-H-Multizone heating)	
11. Ducts			
a. Sup: Unc. Ret: Unc. AH: Garage	Sup. R=6.0, 168.0 ft		
b. N/A			

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

Builder Signature: _____ Date: _____

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



**NOTE: The home's estimated energy performance score is only available through the FLA/RES computer program. This is not a Building Energy Rating. If your score is 80 or greater (or 86 for a US EPA/DOE EnergyStar™ designation), your home may qualify for energy efficiency mortgage (EEM) incentives if you obtain a Florida Energy Gauge Rating. Contact the Energy Gauge Hotline at 321/638-1492 or see the Energy Gauge web site at www.fsec.ucf.edu for information and a list of certified Raters. For information about Florida's Energy Efficiency Code For Building Construction, contact the Department of Community Affairs at 850/487-1824.*

EnergyGauge® (Version: FLR1PB v3.4)

AC# 14 / 1334

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L04070201891

DATE	BATCH NUMBER	LICENSE NBR
------	--------------	-------------

07/02/2004	040006946	CRC1326315
------------	-----------	------------

The RESIDENTIAL CONTRACTOR

Named below IS CERTIFIED

Under the provisions of Chapter 489 FS.

Expiration date: AUG 31, 2006

PRIZAMENT, TINA
ROYALE CUSTOM HOMES INC
14504 NW 193RD STREET
ALACHUA FL 32615

AC# 1424639

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L04052500137

DATE	BATCH NUMBER	LICENSE NBR
------	--------------	-------------

05/25/2004	200482213	QB31365
------------	-----------	---------

The BUSINESS ORGANIZATION

Named below IS QUALIFIED

Under the provisions of Chapter 489 FS.

Expiration date: AUG 31, 2005

(THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS

COMPANY TO DO BUSINESS ONLY IF IT HAS A QUALIFIER.)

ROYALE CUSTOM HOMES INC
14504 NW 193RD STREET
ALACHUA FL 32615

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

TOM GALLAGHER
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

**** CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW ****

CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation Law.

EFFECTIVE DATE: 02/17/2004

** EXPIRATION DATE: 02/17/2006

PERSON: PRIZAMEN, TINA C

FEIN: 33761266

BUSINESS NAME: ROYALE CUSTOM HOMES, INC.
AND ADDRESS: POST OFFICE BOX 2179
HIGH SPRINGS FL 32655

SCOPE OF BUSINESS OR TRADE: RESIDENTIAL CONTRACTOR

IMPORTANT: Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-04

QUESTIONS? (850) 488-2333

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

<p>STATE OF FLORIDA DEPARTMENT OF FINANCIAL SERVICES DIVISION OF WORKERS' COMPENSATION</p> <p>CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW</p> <p>EFFECTIVE: 02/17/2004 ** EXPIRATION DATE: 02/16/2006</p> <p>PERSON: PRIZAMEN, TINA C FEIN: 33761266</p> <p>BUSINESS NAME: ROYALE CUSTOM HOMES, INC. AND ADDRESS: POST OFFICE BOX 2179 HIGH SPRINGS FL 32655</p> <p>SCOPE OF BUSINESS OR TRADE: RESIDENTIAL CONTRACTOR</p>	<p>FOLD HERE</p> <p>IMPORTANT</p> <p>Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.</p> <p>QUESTIONS? (850) 488-2333</p>
--	--

CUT HERE

* Carry bottom portion on the job, keep upper portion for your records.

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-04



UNIVERSAL

ENGINEERING SCIENCES

Consultants In: Geotechnical Engineering •
Environmental Sciences • Construction Materials Testing

4475 S.W. 35th Terrace • Gainesville, Florida 32608 • (352) 372-3392

REPORT ON IN-PLACE DENSITY TESTS

CLIENT: Royale Custom Homes Permit # 000022587

PROJECT: Res.
1314 SW CR 18 Columbia County

AREA TESTED: Fill & prep bldg pad & Foundation

COURSE: F/G DEPTH OF TEST: 0-1'

TYPE OF TEST: ASTM D-2922 DATE TESTED: 12-20-04

NOTE: The below tests DO/DO NOT meet the minimum 95 % compaction requirements of maximum density.

REMARKS: _____

LOCATION OF TESTS	DRY DEN.	MAX. DEN.	% MAX. DEN.	% MOIST.	OPT. MOIST.
		106.2			13.2
approx. center of West Foundation	103.2		97.2	10.6	
approx. center of pad	106.0		99.8	7.2	
approx. center of East Foundation	102.9		96.9	10.8	

TECH. D.G.

COLUMBIA COUNTY OFFICE DEPARTMENT OF BUILDING AND ZONING

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 34-GS-16-04059-503

Building permit No. 000022587

Use Classification SFD, UTILITY

Fire: 5.67

Permit Holder ROYALE CUSTOM HOMES

Waste: 12.25

Owner of Building ROYALE CUSTOM HOMES

Total: 17.92

Location: 6318 SW CR 18, FT. WHITE OAKS, LOT 3



Date: 08/24/2005

Harry Dickel

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

Permit No. _____
Tax Folio No. R04059-503

Inst: 2004024540 Date: 11/02/2004 Time: 14:41
mk DC, P. DeWitt Cason, Columbia County B: 1029 P: 1731

NOTICE OF COMMENCEMENT

State of Florida
County of Alachua

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:
Lot 3, Fort White Oaks Replat, A subdivision according to Plat thereof recorded in Plat Book 6, Page 41, Public Records of Columbia County, Florida.
2. General description of improvement: single family residence.
3. Owner information:
 - a. Name: Royale Custom Homes, Inc.
Address: P.O. Box 2179, High Springs, Florida 32655
 - b. Interest in property: Fee simple titleholder
 - c. Name and address of fee simple titleholder (if other than Owner): N/A
4.
 - a. Contractor: Royale Custom Homes, Inc.
Address: P.O. Box 2179
High Springs, Florida 32655
 - b. Contractor's phone number: 386-454-0975.
5. Surety: None.
 - a. Address: .
 - b. Phone number:
 - c. Amount of bond: \$.
6.
 - a. Lender: Millennium Bank.
Address: 4340 Newberry Road, Gainesville, Florida 32605.
 - b. Lender's phone number: 352-335-5865
7.
 - a. Persons 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: .
Address:
 - b. Phone numbers of designated persons:
8.
 - a. In addition to himself or herself, Owner designates of to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.
 - b. Phone number of person or entity designated by owner:
9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified):

STATE OF FLORIDA, COUNTY OF COLUMBIA
I HEREBY CERTIFY, that the above and foregoing
is a true copy of the original filed in this office.
P. DeWITT CASON, CLERK OF COURTS

By *Michael Leon*
Deputy Clerk
Date Nov 2, 2004



Royale Custom Homes, Inc.

By *Tina Prizament*, President

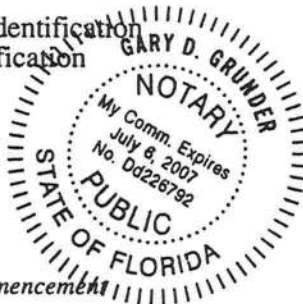
(Corporate Seal)

The foregoing instrument was acknowledged before me this 28 day of October, 2004 by Royale Custom Homes, Inc. who

- (☒) is personally known to me
(☐) who have produced a valid Florida driver's license as identification
(☐) who produced _____ as identification

[Signature]
Notary Public at Large, State of Florida

(SEAL)
7592



Notice of Treatment

39249

Applicator Florida Pest Control & Chemical Co.

Address 116 NW 16 Ave.

City Gville

Phone 376-2661

Site Location Subdivision _____

Lot# _____ Block# _____ Permit# ~~22587~~ 22587

Address 6318 NW CR 18

AREAS TREATED

Area Treated	Date	Time	Gal.	Print Technician's Name
Main Body	12-20-04	2:21	226.5	Josh M.
Patio/s #	✓			
Stoop/s #				
Porch/s #	✓			
Brick Veneer				
Extension Walls				
A/C Pad				
Walk/s #				
Exterior of Foundation				
Driveway Apron				
Out Building				
Tub Trap/s				
(Other)				

Name of Product Applied Dursban TC .5 %

Remarks 2265 Sq Ft.