

DATE 08/31/2009

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

PERMIT 000028045

APPLICANT PAULA SAUL PHONE 352 333-7678
ADDRESS 3499 NW 97TH BLVD GAINESVILLE FL 32606
OWNER JONATHAN & DOLORES OORLOG PHONE 752-9215
ADDRESS 276 NW MALLARD PLACE LAKE CITY FL 32055
CONTRACTOR PAUL DAVIS RESTORATION OF North Central Florida PHONE 352 332-5306
LOCATION OF PROPERTY 90W, TR COMMERCE, TR FAIRWAY DR., TL EGRET, TL HARRIS LAKE DR., TL MALLARD PLACE, TR MALLARD, 4TH LOT ON LEFT
TYPE DEVELOPMENT RENOVATION/SFD ESTIMATED COST OF CONSTRUCTION 18392.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING RSF-2 MAX. HEIGHT
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 26-3S-16-02308-129 SUBDIVISION FAIRWAY VIEW
LOT 21 BLOCK PHASE UNIT TOTAL ACRES 0.91

CBC1255866
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING X09-260 BK WR N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: NOC ON FILE
Check # or Cash 6933

FOR BUILDING & ZONING DEPARTMENT ONLY

Temporary Power Foundation Monolithic
Under slab rough-in plumbing Slab Sheathing/Nailing
Framing Insulation
Rough-in plumbing above slab and below wood floor Electrical rough-in
Heat & Air Duct Peri. beam (Lintel) Pool
Permanent power C.O. Final Culvert
Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing
Reconnection RV Re-roof

BUILDING PERMIT FEE \$ 95.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
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 170.00
INSPECTORS OFFICE CLERKS OFFICE

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

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

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

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

Columbia County Building Permit Application

CK# 6933

For Office Use Only Application # 0908-46 Date Received 8/27 By JW Permit # 28045
 Zoning Official BSK Date 28-08-09 Flood Zone X Land Use Res. Low Density Zoning RSF-2
 FEMA Map # N/A Elevation N/A MFE N/A River N/A Plans Examiner (initials) Date 8/28/09
 Comments NO CHANGES: TREE Damaged Roof: Tri Steam. No Additional Sq. Ft.
 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 0 N/A

Septic Permit No. X-09-260 in Release Box Fax 352-333-7678

Name Authorized Person Signing Permit Paula Saul Phone 352-332-5306

Address 3499 NW 97th Blvd., Ste. 10, Gainesville, FL 32606

Owners Name Jonathan + Dolores Dorlog Phone 386-752-9215

911 Address 276 NW Mallard Place, Lake City, FL 32055

Contractors Name Jerry Saul Paul Davis Restoration of North Central Florida Phone 352-332-5306

Address 3499 NW 97th Blvd., Ste. 10, Gainesville, FL 32606

Fee Simple Owner Name & Address _____
 Bonding Co. Name & Address _____

Architect/Engineer Name & Address GTC Design Group Inc, 930 SW Baya Drive, Lake City, FL 32055

Mortgage Lenders Name & Address N/A

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

Property ID Number 26-35-16-02308-129 Estimated Cost of Construction \$ 18,392.37

Subdivision Name Lot 21 Fairway View Lot 21 Block _____ Unit 3 Phase _____

Driving Directions 90-W TO COMMERCE BLVD, TL TO FAIRWAY DRIVE TO ESSET, TL TO HARRIS LAKE RD, TL TO MALLARD PL, TL WHEN R ON MALLARD PLACE AND IT'S ON THE L. 4TH

Construction of Repair Renovation Total Acreage .41 Lot Size _____

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height _____

Actual Distance of Structure from Property Lines - Front N/A Side No Addition 5' St Side N/A Rear N/A

Number of Stories _____ Heated Floor Area _____ 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. **CODE: Florida Building Code 2007 with 2009 Supplements and the 2008 National Electrical Code.** Page 1 of 2 (Both Pages must be submitted together.) Revised 6-19-09

Handwritten note: Handwritten Office Manager: Aubrey, 8.28.09

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.

TIME LIMITATIONS OF PERMITS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the time work is commenced. A valid permit receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous approved inspection.

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

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

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

OWNERS CERTIFICATION: I 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. It may be to your advantage to check and see if your property is encumbered by any restrictions.

(Owners Must Sign All Applications Before Permit Issuance.)

Jonathan Danks
Owners Signature

****OWNER BUILDERS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.**

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.

Greg Saul
Contractor's Signature (Permitee)

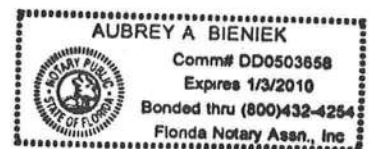
Contractor's License Number CBC 1255866
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 26 day of August 2009.

Personally known or Produced Identification _____

Aubrey A. Bieniek
State of Florida Notary Signature (For the Contractor)

SEAL:



SUBCONTRACTOR VERIFICATION FORM

Jerry Saul - Paul Davis Restoration of

APPLICATION NUMBER 0908-46

CONTRACTOR North Central Florida

PHONE 352-332-5306

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

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

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

ELECTRICAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C _____	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS	Print Name _____ License #: _____	Signature _____ Phone #: _____
ROOFING	Print Name <u>Edwin R WERNICKE</u> License #: <u>CCC1327264</u>	Signature <u>Edwin R Wernicke</u> Phone #: <u>352 726 7006</u>
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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.

NOTICE OF COMMENCEMENT

County Clerk's Office Stamp or Seal

Tax Parcel Identification Number 26-35-16-02308-129 HX

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 21 Fairway View Unit 3, ORB 829-2041, 848-2159
 a) Street (job) Address: 276 NW Mallard Place, Lake City, FL 32055
- 2. General description of improvements: Repair Damage Due to Falling Tree

- 3. Owner Information
 a) Name and address: Jonathan + Dolores Orlog, 276 NW Mallard Place, Lake City, FL 32055
 b) Name and address of fee simple titleholder (if other than owner): _____
 c) Interest in property: Owners

- 4. Contractor Information
 a) Name and address: Jerry Saul - Paul Davis Restoration of North Central Florida, 3499 NW 97th Blvd, Ste. 10, Gainesville, FL 32606
 b) Telephone No.: 352-332-5306 Fax No. (Opt): 352-333-7678

- 5. Surety Information
 a) Name and address: _____
 b) Amount of Bond: _____
 c) Telephone No.: _____ Fax No. (Opt.): _____

- 6. Lender
 a) Name and address: _____
 b) Phone No.: _____

- 7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served:
 a) Name and address: _____
 b) Telephone No.: _____ Fax No. (Opt.): _____

- 8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:
 a) Name and address: _____
 b) Telephone No.: _____ Fax No. (Opt.): _____

- 9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified): _____

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

STATE OF FLORIDA
COUNTY OF COLUMBIA

10. Jonathan Orlog
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager

Print Name

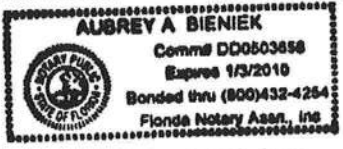
The foregoing instrument was acknowledged before me, a Florida Notary, this 26 day of August, 20 09, by:

* JONATHAN ORLOG as Homeowner (type of authority, e.g. officer, trustee, attorney)

fact) for _____ (name of party on behalf of whom instrument was executed).

Personally Known OR Produced Identification _____ Type _____

Notary Signature Aubrey A Bieniek Notary Stamp or Seal:



- 11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Jonathan Orlog
Signature of Natural Person Signing (in line #10 above.)

This Instrument Prepared by: Harlan E. Markham,
An Officer of ASSOCIATED LAND TITLE GROUP, INC.,
300 N. MARION STREET, LAKE CITY, FLORIDA 32055,
For Purposes of Title Ins.
File # 170-34512/chw
Parcel ID # 26-03S-16-02308-129

97-16676

FILED AND RECORDED IN PUBLIC
RECORDS OF COLUMBIA COUNTY, FL.

1997 NOV 17 PM 1:48

RECORD VERIFIED
P. DeWitt Cason
CLERK OF COURTS
COLUMBIA COUNTY, FLORIDA
BY MRK D.C.

Warranty Deed

(The terms "grantor" and "grantee" herein shall be construed to include all genders and singular or plural as the context indicates.)

Made November 17, 1997, BETWEEN

Domenick A. Nigro, as Trustee of the Domenick A. Nigro Revocable Living Trust dated October 10, 1996, and Jean M. Nigro, As Trustee of the Jean M. Nigro Revocable Living Trust dated October 10, 1996, whose post office address is Rt. 13, Box 350, Lake City, Florida, 32055, grantor

Jonathan W. Oorlog and Dolores M. Oorlog his Wife (SS#: [REDACTED] 147-24-8035)
whose post office address is Rt. 13, Box 350, Lake City, Florida 32055, grantee

WITNESSETH: That the said grantor, for and in consideration of the sum of Ten (\$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, successors and assigns forever, the following described land, situate, lying and being in Columbia County, Florida to-wit:

Lot 21, Fairway View Subdivision "Unit 3", a subdivision according to the plat thereof recorded in Plat Book 5, Pages 27-27A of the public records of Columbia County, Florida.

Subject to easements and restrictions of record, if any, which are specifically not extended or reimposed hereby. Subject to 1998 taxes and assessments.

BK 0848 PG2159

OFFICIAL RECORDS

Documentary Stamp \$ 945.70
Intangible Tax
P. DeWitt Cason
Clerk of Court
By MRK D.C.

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.

IN WITNESS WHEREOF, Grantor has hereunto set grantor's hand and seal the day and year first above written.

BK 0848 PG2180

Signed, sealed and delivered in the presence of:

OFFICIAL RECORDS

Shirley John
Shirley John

Domenick A. Nigro
Domenick A. Nigro, As Trustee

PLEASE PRINT OR TYPE NAME AS IT APPEARS

Carol H. Wright

Jean M. Nigro
Jean M. Nigro, As Trustee

CAROL H. WRIGHT
PLEASE PRINT OR TYPE NAME AS IT APPEARS

STATE OF Florida

COUNTY OF Columbia

I HEREBY CERTIFY, that on November 17, 1997, before me personally appeared Domenick A. Nigro, as Trustee of the Domenick A. Nigro Revocable Living Trust and Jean M. Nigro of the Jean M. Nigro Revocable Living Trust who is personally known to me or has produced the identification identified below, who is the person described in and who executed the foregoing instrument, and who after being duly sworn says that the execution hereof is free act and deed for the uses and purposes herein mentioned.

SWORN TO AND SUBSCRIBED before me the undersigned Notary Public by my hand and official seal, the day and year last aforesaid.

To me personally known () Identified by Driver's License () Identified by _____

My Commission Expires: _____

Carol H. Wright
Notary Public

Commission No.: _____
CAROL H. WRIGHT

Notary Public - State of Florida
My Commission Expires: April 9, 1998
Commission No. CC 356981



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783

(850) 487-1395

JPJ ADVENTURES INC
PAUL DAVIS RESTORATION OF NORTH CENTRAL FLORIDA
1583 E CLEVELAND ST FL 34442
HERNANDO

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!

STATE OF FLORIDA AC# 4487937
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 QB56733 07/29/09 090054122
 QUALIFIED BUSINESS ORGANIZATION
 JPJ ADVENTURES INC
 PAUL DAVIS RESTORATION OF NORTH CENTRAL FLORIDA
 (NOT A LICENSE TO PERFORM WORK. IT HAS A LICENSED QUALIFIER.)
 IS QUALIFIED under the provisions of Ch. 489 FS
 Expiration date: AUG 31, 2011 L09072900874

DETACH HERE

AC# 4487937

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L09072900874

DATE	BATCH NUMBER	LICENSE NBR
07/29/2009	090054122	QB56733

The BUSINESS ORGANIZATION Named below IS QUALIFIED Under the provisions of Chapter 489 FS. Expiration date: AUG 31, 2011 (THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS THE COMPANY TO DO BUSINESS ONLY IF IT HAS A QUALIFIER.)

JPJ ADVENTURES INC
PAUL DAVIS RESTORATION OF NORTH CENTRAL FLORIDA
3499 NW 97TH BLVD
STE 10 GAINESVILLE FL 32606

CHARLIE CRIST GOVERNOR

CHARLES W. DRAGO SECRETARY

DISPLAY AS REQUIRED BY LAW



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783

(850) 487-1395

SAUL, JERRY
PAUL DAVIS RESTORATION OF NORTH CENTRAL FLORIDA
1583 E CLEVELAND ST
HERNANDO FL 34442

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CBC1255866 08/23/08 088019979

CERTIFIED BUILDING CONTRACTOR
SAUL, JERRY
PAUL DAVIS RESTORATION OF NORTH

IS CERTIFIED under the provisions of ch.489 F.
Expiration date: AUG 31, 2010 L08082300379

DETACH HERE

AC# 3940063

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L08082300379

DATE	BATCH NUMBER	LICENSE NBR
08/23/2008	088019979	CBC1255866

The BUILDING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 F.S.
Expiration date: AUG 31, 2010

SAUL, JERRY
PAUL DAVIS RESTORATION OF NORTH CENTRAL FLORIDA
1583 E CLEVELAND ST
HERNANDO FL 34442

CHARLIE CRIST
GOVERNOR

CHARLES W. DRAGO
SECRETARY

DISCLAIMER REQUIRED BY LAW



CERTIFICATE OF LIABILITY INSURANCE

OP ID RN
JPJAD-1

DATE (MM/DD/YYYY)

08/27/09

PRODUCER Carlisle Fields & Company, LLC P.O. Box 1027 Clearwater FL 33758-7910 Phone: 727-797-0441 Fax: 727-725-3663	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.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED JPJ Adventures, Inc. dba Paul Davis Restorations 3499 NW 97th Blvd-Unit 10 Gainesville FL 32606-7347	INSURER A	Auto Owners Insurance Company
	INSURER B	Steadfast Insurance Company
	INSURER C	
	INSURER D	
	INSURER E	

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 LTR	ADD'L INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
B		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR Pollution Liab	GPL938246100	02/26/09	02/26/10	EACH OCCURRENCE \$ 1000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 1000000 GENERAL AGGREGATE \$ 2000000 PRODUCTS - COM/OP AGG \$ 2000000
B		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
B		EXCESS / UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 10000	SEO938247100	02/26/09	02/26/10	EACH OCCURRENCE \$ 2000000 AGGREGATE \$ 2000000 \$ \$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under SPECIAL PROVISIONS below	20688915	10/21/08	10/21/09	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1000000 E.L. DISEASE - EA EMPLOYEE \$ 1000000 E.L. DISEASE - POLICY LIMIT \$ 1000000
		OTHER				

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

CERTIFICATE HOLDER

COLUM-9

Columbia County Bldg Dept
 PO DRAWER 1529
 LAKE CITY FL 32056

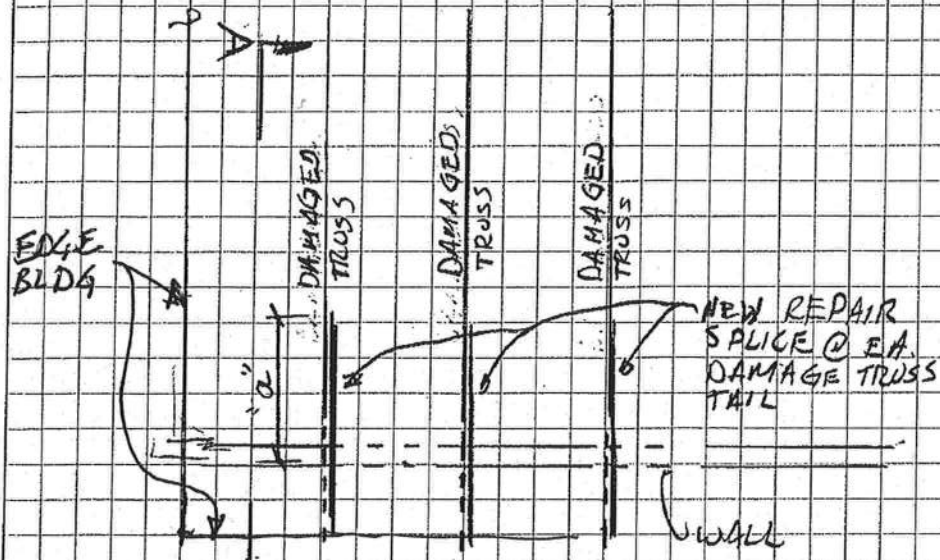
CANCELLATION

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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

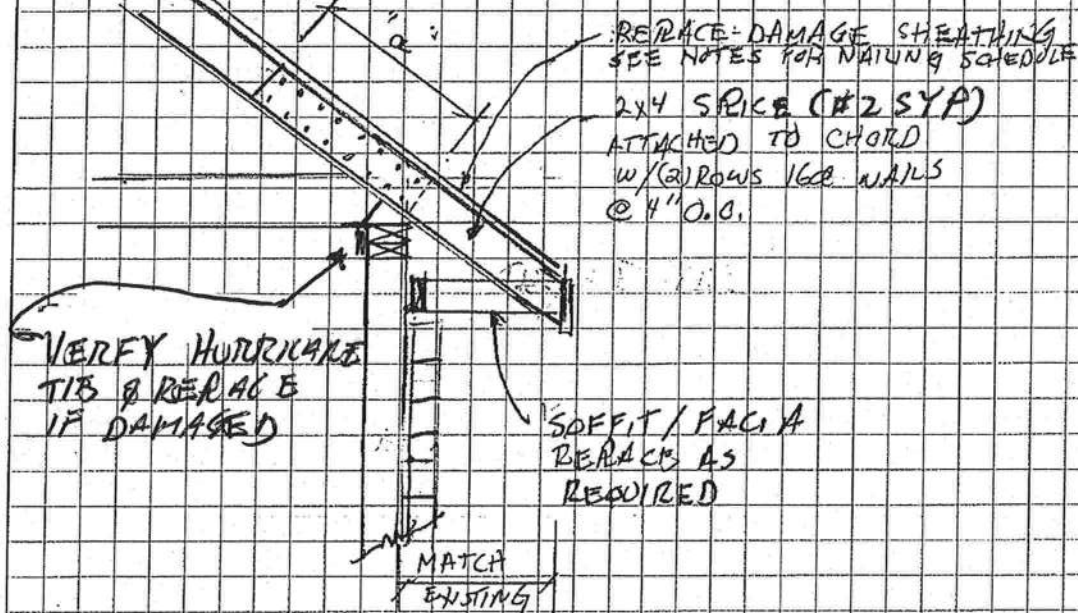
DESIGN INFO:

WIND: 110 mph
 CAT: II
 EXP: C
 ENCLOSED: +/- 0.18
 CLADDING / COMPONENTS
 +/- 35 psf (Worst Case)

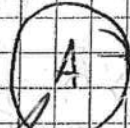


ROOF PLAN

a = 36" MIN (FROM PT. OF BREAK / DAMAGE)



SECTION



3/4" x 1'-0"

NOTES:

REPLACE DAMAGED SHEATHING w/ 1/2" PLYWOOD OR OSB SHEATHING NAILED @ 4" O.C. ON EDGES & 12" O.C. FIELD w/ 8d NAILS

SUBJECT
 TRUSS REPAIR
 OORLOG RESIDENCE
 276 NW MALLARD PL
 LAKE CITY, FL 32055

LIVE OAK OFFICE
 130 WEST HOWARD STREET
 LIVE OAK, FL 32064
 PH: 386.362.3678



GTC DESIGN GROUP, LLC
 P.O. BOX 167
 LIVE OAK, FL 32064
 STRUCTURAL/CIVIL ENGINEERS
 FAX: 386.362.6133
 www.gtcdesigngroup.com

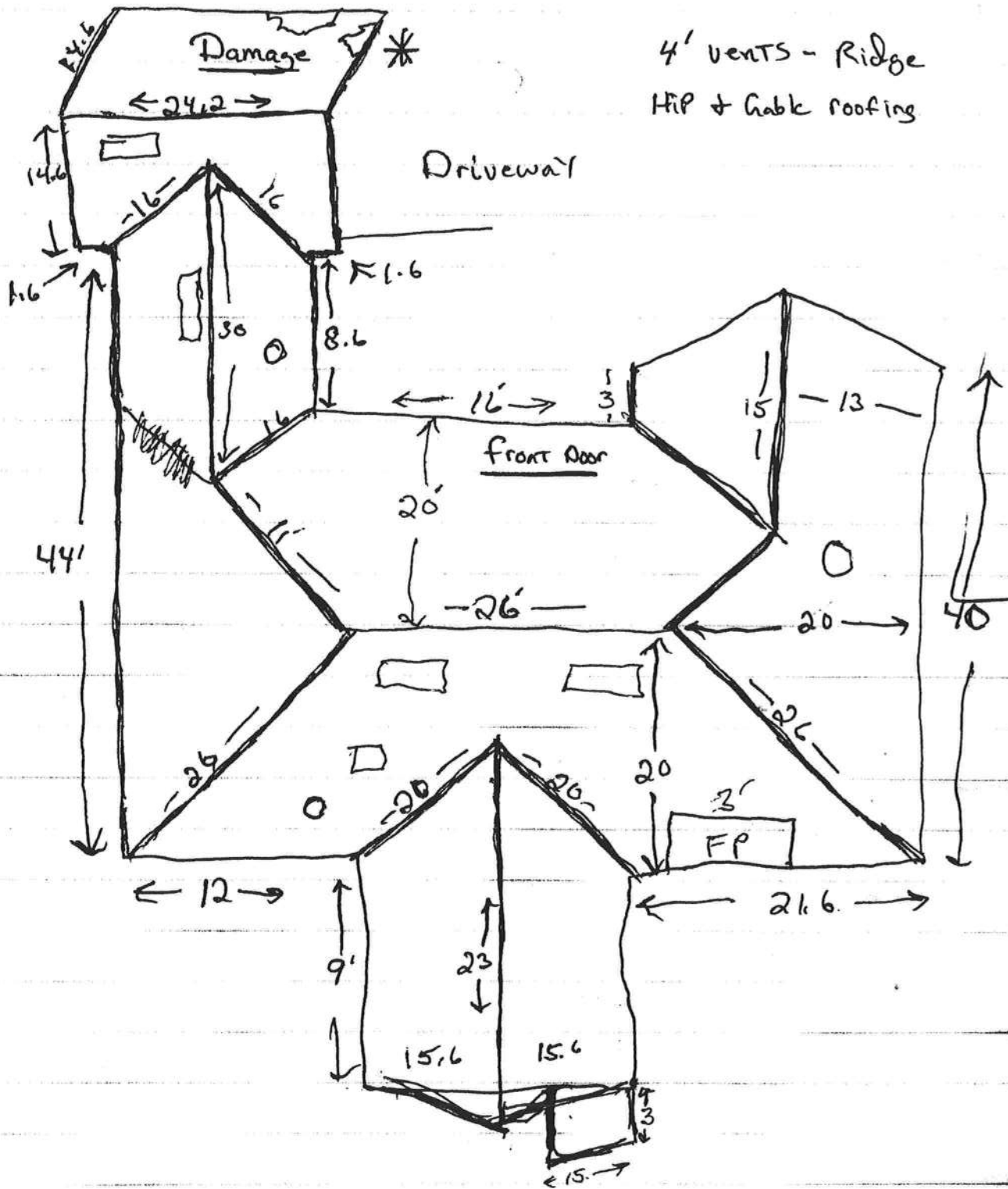
LAKE CITY OFFICE
 930 SW BAYA DRIVE
 LAKE CITY, FL 32055
 PH: 386.754.3677

PROJECT #: PF09-089
 PROJECT NAME: OORLOG
 DATE: 8/24/09
 ENGINEER: G. GILL

8/24/09

Street

Jon Oorlog



4' vents - Ridge
HIP + Gable roofing

Backyard



of North Central Florida
 3499 NW 97th Blvd., Suite 10
 Gainesville, FL 32606
 (352) 332-5306 • Fax: (352) 333-7676
 State Lic. # CBC1255866

WORK AUTHORIZATION

We authorize Paul Davis Restoration of North Central Florida, herein-after referred to as Contractor, to make repairs to our property at the address below, damaged by Tree on or about 8-15- 2009, the "Terms and Conditions" on the back of this page are a part of this authorization.

We agree that the total cost of the work will be in accordance with the original estimate and any supplemental estimates prepared by Contractor and approved by the adjuster for our insurance company, plus any change orders approved by Owners and Contractor.

This work authorization, along with all approved estimates, supplemental estimates and change orders shall constitute the contractual obligations of the Owners and Contractor.

We understand that Contractor has no connection with our insurance company or its adjuster and that we alone have the authority to authorize Contractor to make said repairs.

We agree that any portion of work, such as deductibles, betterment, depreciation, or additional work requested by us, not covered by insurance, must be paid by us on or before completion.

Our mortgage payments are made to N/A and we request them to protect the interest of the Contractor in handling the loss draft or check.

Our insurance company is Nationwide Ins and we authorize them to pay all proceeds due Contractor payable under our policy directly to Contractor and any mortgage company named. If our names are included on the payment, we agree to promptly endorse said payment to mortgage company or into an escrow account in a bank acceptable to Contractor, for disbursement by a series of draws as follows:

We agree that any payments not made in accordance with this schedule shall be considered delinquent after ten days and agree to pay interest thereon at 1 1/2% per month until paid.

Due to the nature of the work no completion date is specified. No verbal agreements are binding on Contractor.

Signed at _____ this 17th day of August, 2009

Owner's Name: Jon Corlog Owner: X Jon Corlog

Loss Address: 276 NW Mallard Lake City Owner: _____

Phone: 386-752-9215 Contractor: Jon

Permit #

Paul Davis Restoration of North Central Florida

28045

3499 NW 97th BLVD. #10
Gainesville, FL. 32606
Office: 352-332-5306 Fax: 352-333-7678
CBC 1255866 F.E.I.N. 20-1424959
FLNC@PDR-USA.NET

Insured: JON OORLOG
Property: 276 NW MALLARD PLACE
LAKE CITY, FL 32055
Home: 276 NW MALLARD PLACE
LAKE CITY, FL 32055-0725

Home: (386) 752-9215
Business: () -

Claim Rep.: Lori Mehall

Estimator: Frank Eastwood

Reference:
Company: Nationwide Insurance co.

Contractor: Jerry Saul
Company: PDR of North Central Florida
Business: 3499 NW 97th Blvd., Suite 10
Gainesville, FL 32606

Business: (352) 332-5306

Claim Number: 7709649060HOPolicy Number: 649060 Type of Loss: 104
09081501

Coverage	Deductible	Policy Limit
Dwelling	\$1,000.00	\$210,900.00
Other Structures	\$0.00	\$4,218.00
Contents	\$0.00	\$105,450.00

Date Contacted: 8/17/2009
Date of Loss: 8/15/2009
Date Inspected: 8/17/2009
Date Est. Completed: 8/18/2009 4:48 PM
Date Received: 8/15/2009
Date Entered: 8/17/2009 2:00 PM

Price List: FLGA5B_AUG09
Restoration/Service/Remodel
Estimate: JON_OORLOG
Depreciate Materials Only: No
Depreciate Removal: No
Depreciate O&P: No

THIS ESTIMATE IS FOR THE REPAIR OF DAMAGE CAUSED BY A FALLEN TREE, THAT FELL ONTO THE ATTACHED GARAGE ROOF AND CAUSED SOME TRUSS--SOFFITT--AND ROOF DAMAGE. NO INTERIOR DAMAGE OCCURED.
THE INSURED PAID FOR HIS OWN TREE SERVICE FOR THE REMOVAL OF THE FALLEN TREE
JON_OORLOG 8/18/2009 Page: 1

Paul Davis Restoration of North Central Florida

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JON_OORLOG
Main Level

Roof1

0.00 SF Long Wall 0.00SF Short Wall

CAT	SEL	ACT	DESCRIPTION	REMOVE	REPLACE	TOTAL
		CALC	QNTY			
3.	FRM	SH1/2	& R&R Sheathing - plywood - 1/2" CDX			
		128	128.00SF[D]	0.43+	1.07 =	192.00
4.	FRM	LAB	+ Carpenter - General Framer - per hour			
		16	16.00HR[D]	0.00+	63.43 =	1,014.88
2 men 8 hours each to reframe damaged truss's as per engineers report and to reframe 24 sf of soffitt box and fascia						
5.	FRM	2X4X10	+ 2" x 4" x 10' #2 & better Fir / Larch (material only)			
		18	18.00EA	0.00+	2.34 =	42.12
6.	SFG	SFTM	& R&R Soffit - metal			
		76	76.00SF[D]	0.23+	2.91 =	238.64
will try to match color as close as possible this measurement covers from corner to corner on 2 sides of the garage where damage has occurred						
7.	SFG	FACW4	+ Fascia - 1" x 4" - #1 pine			
		39	39.00LF[D]	0.00+	3.33 =	129.87
8.	SFG	FACM4	& R&R Fascia - metal, 4"			
		53	53.00LF[D]	0.25+	2.50 =	145.75
9.	FRM	1X2	+ 1" x 2" lumber (.167 BF per LF)			
		39	39.00LF[D]	0.00+	1.44 =	56.16
10.	LIT	SPOT2	& R&R Spot light fixture - double			
		1	1.00EA[D]	10.37+	80.17 =	90.54
11.	RFG	240	- Remove 3 tab - 25 yr. - composition shingle roofing - incl. felt			
		45	45.00SQ[D]	42.17+	0.00 =	1,897.65
12.	RFG	240S	+ 3 tab - 25 yr. - comp. shingle roofing - w/out felt			
		51.75	51.75SQ[D]	0.00+	151.98 =	7,864.97
includes 15% waste for hip roof						
13.	RFG	FELT30	+ Roofing felt - 30 lb.			
		45	45.00SQ[D]	0.00+	27.88 =	1,254.60
14.	RFG	VENTO4	& R&R Roof vent - off ridge type - 4'			
		4	4.00EA[D]	11.71+	76.73 =	353.76

JON_OORLOG

8/18/2009

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□ Paul Davis Restoration of North Central Florida

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CONTINUED - Roof1

CAT	SEL	ACT	DESCRIPTION	REMOVE	REPLACE	TOTAL
		CALC	QNTY			

15. RFG	DRIP	& R&R Drip edge				
	304	304.00LF[D]	0.25+	1.37 =	492.48	
16. RFG	RIDGC	+ Ridge cap - composition shingles				
	149	149.00LF[D]	0.00+	3.46 =	515.54	
18. RFG	FLCH>	+ Chimney flashing - large (32" x 60")				
	1	1.00EA[D]	0.00+	273.95 =	273.95	
Totals: Roof1					14562.91	

GENERAL

0.00 SF Long Wall 0.00SF Short Wall

CAT	SEL	ACT	DESCRIPTION	REMOVE	REPLACE	TOTAL
		CALC	QNTY			
1. FEE	PLAN		+ Architectural/Drafting fees (Bid item)			
		1	1.00EA[D]	0.00+	0.00 =	0.00
engineers report for the truss repair will be required for the county permit---this will take 1 to 2 weeks will provide copy when recieved for payment						
2. FEE	TIPF		+ permits & fees [bid item]			
		1	1.00EA[D]	0.00+	0.00 =	0.00
this will take 2 to 3 weeks will provide copy for payment when received						
17. DMO	DUMP<		- Dumpster load - Approx. 12 yards, 1-3 ton of debris			
		1	1.00EA[D]	369.81+	0.00 =	369.81
Totals: GENERAL						369.81
Total: Main Level						14,932.72
Line Item Totals: JON_OORLOG						14,932.72

JON_OORLOG

8/18/2009

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□ Paul Davis Restoration of North Central Florida

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Grand Total Areas:

0.00 SF Walls	0.00 SF Ceiling	0.00 SF Walls & Ceiling
0.00 SF Floor	0.00 SY Flooring	0.00 LF Floor Perimeter
0.00 SF Long Wall	0.00 SF Short Wall	0.00 LF Ceil. Perimeter
0.00 Floor Area	0.00 Total Area	0.00 Interior Wall Area
779.60 Exterior Wall	0.00 Exterior Perimeter	

	Area	of Walls	
4,476.20	Surface Area	44.76	Number of Squares
153.83	Total Ridge Length	0.00	Total Hip Length
			501.25 Total Perimeter Length

JON_OORLOG 8/18/2009 Page: 4

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Summary for Dwelling

Line Item Total		14,932.72
Material Sales Tax	@ 6.750% x 5,840.28	394.22

Subtotal		15,326.94
Overhead	@ 10.0% x 15,326.94	1,532.69
Profit	@ 10.0% x 15,326.94	1,532.69

Replacement Cost Value		\$18,392.32
Less Deductible		(1,000.00)

Net Claim		\$17,392.32
		=====

 Frank Eastwood

JON_OORLOG 8/18/2009 Page: 5

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Recap by Room

Estimate: JON_OORLOG

Area: Main Level		
Roof1	14,562.91	97.52%
GENERAL	369.81	2.48%

Area Subtotal: Main Level	14,932.72	100.

		00%

Subtotal of Areas	14,932.72	100.00%

Total	14,932.72	100.00%

JON_OORLOG

8/18/2009

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Paul Davis Restoration of North Central Florida

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Recap by Category

O&P Items	Total Dollars	%
GENERAL DEMOLITION	2,486.44	13.52%
FRAMING & ROUGH CARPENTRY	1,250.12	6.80%
LIGHT FIXTURES	80.17	0.44%
ROOFING	10,632.46	57.81%
SOFFIT, FASCIA, & GUTTER	483.53	2.63%

Subtotal	14,932.72	81.19%
Material Sales Tax @ 6.750%	394.22	2.14%
Overhead @ 10.0%	1,532.69	8.33%
Profit @ 10.0%	1,532.69	8.33%

O&P Items Subtotal	18,392.32	100.00%

JON_OORLOG

8/18/2009

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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, Jerry Saul (license holder name), licensed qualifier
 for Paul Davis Restoration of North Central Florida (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. Paula Saul	1. <i>Paula Saul</i>
2. Richard Brooks Bice	2. <i>R Brooks Bice</i>
3. Aubrey Bieniek	3. <i>Aubrey Bieniek</i>
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.

Jerry Saul License Holders Signature (Notarized) CBC 1255866 License Number 8/26/09 Date

NOTARY INFORMATION:
 STATE OF: Florida COUNTY OF: Alachua

The above license holder, whose name is Jerry Saul,
 personally appeared before me and is known by me or has produced identification
 (type of I.D.) _____ on this 26 day of August, 2009.

Aubrey Bieniek
 NOTARY'S SIGNATURE

(Seal/Stamp)
 AUBREY A BIENIEK
 Comm# DD0503658
 Expires 1/3/2010
 Bonded thru (800)432-4254
 Florida Notary Assn., Inc



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

6-25-09

**MINIMUM PLAN REQUIREMENTS FOR THE
FLORIDA BUILDING CODE RESIDENTIAL 2007 EFFECTIVE 1 MARCH 2009 & 2009
SUPPLEMENTS EFFECTIVE 1 MARCH 2009, ONE (1) AND TWO (2) FAMILY DWELLINGS
with Supplements and Revision, OF THE NATIONAL ELECTRICAL 2008**

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

ALL BUILDING PLANS MUST INDICATE COMPLIANCE with the Current 2007 FLORIDA BUILDING CODES RESIDENTIAL EFFECTIVE 1 MARCH 2009 & 2009 SUPPLEMENTS EFFECTIVE 1 MARCH 2009. 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:			
2	All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void			
3	Condition space (Sq. Ft.)			
	Total (Sq. Ft.) under roof			

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			
5	Dimensions of all building set backs			
6	Location of all other structures (include square footage of structures) on parcel, existing or proposed well and septic tank and all utility easements.			
7	Provide a full legal description of property.			

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		
8	Plans or specifications must show compliance with FBCR Chapter 3	IIIII	IIII	IIIII
		YES	NO	N/A
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	Show compliance with Section FBCR 310 Emergency escape and rescue opening shown in each bedroom (net clear opening shown) and Show compliance with Section FBCR 613.2 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.			
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	Show stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails			
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 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
---	--

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) 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			

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 Sub mit other approved termite protection methods. Protection shall be provided by registered termiticides			
----	--	--	--	--

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			
48	Show the sub-floor structural panel sheathing type, thickness and fastener schedule on the edges & interior 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 assembles covering			
72	Submit Florida Product Approval numbers for each component of the roof assembles covering			

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		
		YES	NO	N/A
73	Show the insulation R value for the following areas of the structure			
74	Attic space			
75	Exterior wall cavity			
76	Crawl space			

HVAC information

77	Submit two copies of a Manual J sizing equipment or equivalent computation study			
78	Exhaust fans shown in bathrooms Mechanical exhaust capacity of 50 cfm intermittent or 20 cfm continuous required			
79	Show clothes dryer route and total run of exhaust duct			

Plumbing Fixture layout shown

80	All fixtures waste water lines shall be shown on the foundation plan			
81	Show the location of water heater			

Private Potable Water

82	Pump motor horse power			
83	Reservoir pressure tank gallon capacity			
84	Rating of cycle stop valve if used			

Electrical layout shown including

85	Show Switches, receptacles outlets, lighting fixtures and Ceiling fans			
86	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			
87	Show the location of smoke detectors & Carbon monoxide detectors			
88	Show service panel, sub-panel, location(s) and total ampere ratings			
89	<p>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.</p> <p>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</p>			
90	Appliances and HVAC equipment and disconnects			
91	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.			

Disclosure Statement for Owner Builders *If you as the applicant will be acting as an owner/builder under section 489.103(7) of the Florida Statutes, submit the required owner builder disclosure statement form.*

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 preformed.

<p>GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</p>	<p>Items to Include- Each Box shall be Circled as Applicable</p>
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THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS

		YES	NO	N/A
92	Building Permit Application A current Building Permit Application form is to be completed and submitted for all residential projects	✓		
93	Parcel Number The parcel number (Tax ID number) from the Property Appraiser (386) 758-1084 is required. A copy of property deed is also requested	✓		
94	Environmental Health Permit or Sewer Tap Approval A copy of a approved Columbia County Environmental Health (386) 758-1058			
95	City of Lake City A permit showing an approved waste water sewer tap			
96	Toilet facilities shall be provided for all construction sites	✓		
97	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.			

98	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		
99	CERTIFIED FINISHED FLOOR ELEVATIONS will be required on any project where the base flood elevation (100 year flood) has been established		
100	A development permit will also be required. Development permit cost is \$50.00		
101	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. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver (\$50.00). All culvert waivers are sent to the Columbia County Public Works Department for approval or denial.		
102	911 Address: If the project is located in an area where a 911 address has not been issued, then 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		

Section R101.2.1 of the Florida Building Code Residential:

The provisions of Chapter 1, Florida Building Code, Building shall govern the administration and enforcement of the Florida Building Code, Residential.

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.

When the submitted application is approved for permitting the applicant will be notified by phone as to the date and time a building permit will be prepared and issued by the Columbia County Building & Zoning Department

PRODUCT APPROVAL SPECIFICATION

SHEET

Location: _____

Project Name: *Oorlog*

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			
5. Automatic			
6. Other			
B. WINDOWS			
1. Single hung			
2. Horizontal Slider			
3. Casement			
4. Double Hung			
5. Fixed			
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11. Dual Action			
12. Other			
C. PANEL WALL			
1. Siding			
2. Soffits			
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	<i>Atlas</i>	<i>35 year shingles</i>	<i>9792.1</i>
2. Underlayments			
3. Roofing Fasteners			
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			