

DATE 5/05/2005

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000023108

APPLICANT KENNY TOWNSEND PHONE 397-3495
ADDRESS PO BOX 1621 LAKE CITY FL 32056
OWNER EDWARD HENRY PHONE
ADDRESS 243 SW INWOOD COURT LAKE CITY FL 32024
CONTRACTOR COLUMBIA HOME BUILDERS PHONE 752-4071
LOCATION OF PROPERTY 90 W, L SISTERS WELCOME RD, R INTO CREEKSID, RIGHT
INWOOD COURT, LOT 42 ON THE RIGHT

TYPE DEVELOPMENT SFD,UTILITY ESTIMATED COST OF CONSTRUCTION 97300.00
HEATED FLOOR AREA 1946.00 TOTAL AREA 2974.00 HEIGHT 24.00 STORIES 1
FOUNDATION CONCRETE WALLS FRAMED ROOF PITCH 6/12 FLOOR SLAB
LAND USE & ZONING RSF-2 MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00
NO. EX.D.U. 0 FLOOD ZONE XPP DEVELOPMENT PERMIT NO.

PARCEL ID 12-4S-16-02939-142 SUBDIVISION CREEKSID
LOT 42 BLOCK PHASE UNIT TOTAL ACRES .75

000000647 N RB0029433
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
PERMIT 05-0474-N BK N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: PLAT REQUIRES 1ST FLOOR ELEVATION TO BE MINIMUM 131.0 FEET/
ELEVATION LETTER REQUIRED BEFORE SLAB

Check # or Cash 1247

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 \$ 490.00 CERTIFICATION FEE \$ 14.87 SURCHARGE FEE \$ 14.87
MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$
FLOOD ZONE DEVELOPMENT FEE \$ CULVERT FEE \$ 25.00 TOTAL FEE 594.74

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."

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 INCONVINCE, 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.

Columbia County Building Permit Application

647

For Office Use Only Application # 0504-57 Date Received 4-19-05 By LH Permit # 23108
Application Approved by - Zoning Official BLK Date 05.05.05 Plans Examiner OK 5TH Date 5-4-05
Flood Zone Xamplet Development Permit N/A Zoning RSF-2 Land Use Plan Map Category Res. Low Density
Comments Plot Requires 1st Floor Elevation to be minimum of 131.0 feet Elevation
EH - NOC Letter is Required

Applicants Name Kenny Townsend Phone 397-3495
Address PO BOX 1621 Lake City
Owners Name Edward W. Henry Phone _____
911 Address 243 SW Inwood Court
Contractors Name Columbia Home Builders' Inc Phone 752-4071
Address PO BOX 1621 L.C.
Fee Simple Owner Name & Address Edward W. Henry
Bonding Co. Name & Address _____
Architect/Engineer Name & Address William Myers Design
Mortgage Lenders Name & Address None

Property ID Number 12-45-16-02939142 Estimated Cost of Construction _____
Subdivision Name Creekside Lot 42 Block _____ Unit _____ Phase _____
Driving Directions 90W - T.L. on Sisters Welcome - T.R. Creekside - T.R. on Inwood Court
Lot 42 on Right

Type of Construction Frame / Brick Veneer Number of Existing Dwellings on Property 0
Total Acreage 3/4 Lot Size 15X274 Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
Actual Distance of Structure from Property Lines - Front 30' Side 28' Side 28' Rear 165'
Total Building Height 24' Number of Stories 1 Heated Floor Area 1946 Roof Pitch 6 + 10/12

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.

Kenny Townsend
Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me
this 19 day of APRIL 20 05.
Personally known ✓ or Produced Identification _____

Kenny Townsend
Contractor Signature
Contractors License Number BB0029433
Competency Card Number _____

NOTARY STAMP

Laurie Hodson
Notary Signature



Compliance with Method B Chapter 6 of the Florida Energy Efficiency Code may be demonstrated by the use of Form 600B for single and multifamily residences of 3 stories or less in height, and additions to existing residential buildings. To comply, a building must meet or exceed all of the energy efficiency prescriptives in any one of the prescriptive component packages and comply with the prescriptive measures listed in Table 6B-1 of this form. An alternative method is provided for additions of 600 square feet or less by use of Form 600C. If a building does not comply with this method, it may still comply under other sections in Chapter 6 of the Code.

PROJECT NAME: AND ADDRESS:	Edward Henry 243 SW Inwood Court Lake City FL 32244	BUILDER: PERMITTING OFFICE:	Columbia Home Imp. Columbia	CLIMATE ZONE:	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/>
OWNER:	Edward Henry	PERMIT NO.:		JURISDICTION NO.:	22/0000

GENERAL DIRECTIONS

1. New construction including additions which incorporates any of the following features cannot comply using this method: steel stud walls, single assembly roof/ceiling construction, or skylights or other non-vertical roof glass.
2. Choose one of the component packages "A" through "E" from Table 6B-1 by which you intend to comply with the Code. Circle the column of the package you have chosen.
3. Fill in all the applicable spaces of the "To Be Installed" column on Table 6B-1 with the information requested. All "To Be Installed" values must be equal to or more efficient than the required levels.
4. Complete page 1 based on the "To Be Installed" column information.
5. Read "Minimum Requirements for All Packages", Table 6B-2 and check each box to indicate your intent to comply with all applicable items.
6. Read, sign and date the "Prepared By" certification statement at the bottom of page 1. The owner or owner's agent must also sign and date the form.

1. Compliance package chosen (A-F)
2. New construction or addition
3. Single family detached or Multifamily attached
4. If Multifamily—No. of units covered by this submission
5. Is this a worst case? (yes / no)
6. Conditioned floor area (sq. ft.)
7. Predominant eave overhang (ft.)
8. Glass type and area :
 - a. Clear glass
 - b. Tint, film or solar screen
9. Percentage of glass to floor area
10. Floor type, area or perimeter, and insulation:
 - a. Slab on grade (R-value)
 - b. Wood, raised (R-value)
 - c. Wood, common (R-value)
 - d. Concrete, raised (R-value)
 - e. Concrete, common (R-value)
11. Wall type, area and insulation:
 - a. Exterior: 1. Masonry (Insulation R-value)
2. Wood frame (Insulation R-value)
 - b. Adjacent: 1. Masonry (Insulation R-value)
2. Wood frame (Insulation R-value)
12. Ceiling type, area and insulation:
 - a. Under attic (Insulation R-value)
 - b. Single assembly (Insulation R-value)
13. Air Distribution System: Duct insulation, location
Test report (attach if required)
14. Cooling system
(Types: central, room unit, package terminal A.C., gas, none)
15. Heating system:
(Types: heat pump, elec. strip, nat. gas, L.P. gas, gas h.p., room or PTAC, none)
16. Hot water system:
(Types: elec., nat. gas, L.P. gas, solar, heat rec., ded. heat pump, other, none)

Please Print

CK

1.	A	
2.	new	
3.	SFD	
4.	1	
5.	no	
6.	1946	
7.	1.33	
	Single Pane	Double Pane
8a.	sq. ft.	63 sq. ft.
8b.	sq. ft.	sq. ft.
9.	6 %	
10a.	R= 0	lin. ft.
10b.	R=	sq. ft.
10c.	R=	sq. ft.
10d.	R=	sq. ft.
10e.	R=	sq. ft.
11a-1	R= 13	1946 sq. ft.
11a-2	R=	sq. ft.
11b-1	R=	sq. ft.
11b-2	R=	sq. ft.
12a.	R= 30	1130 sq. ft.
12b.	R=	sq. ft.
13.	R=	
14a.	Type: Central	
14b.	SEER/EER: 12	
14c.	Capacity: 2.5 Ton	
15a.	Type: Heat Pump	
15b.	HSPF/COP/AFUE:	
15c.	Capacity: 2.7	
16a.	Type: Electric	
16b.	EF: 90	

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

PREPARED BY:

Benny J. J. J.

DATE:

5-4-05

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

OWNER AGENT:

DATE:

Review of 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 in accordance with Section 553.908, F.S.

BUILDING OFFICIAL:

DATE:

	Columbia County	
21000	Land	001
	AG	000
	Bldg	000
	Xfea	000
21000	TOTAL	B

Mnt' ' 2/21/2005 KYLIE

F1=Task F3=Exit F4=Prompt F10=GoTo PgUp/PgDn F24=More

HALL'S PUMP & WELL SERVICE, INC.

SPECIALIZING IN 4"-6" WELLS



DONALD AND MARY HALL
OWNERS

PHONE (904) 752-1854
FAX (904) 755-7022
~~XXXXXXXXXXXXXXXXXXXX~~
LAKE CITY, FLORIDA 32055
904 NW Main Blvd.

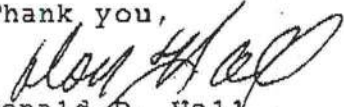
June 12, 2002


NOTICE TO ALL CONTRACTORS

Please be advised that due to the new building codes we will use a large capacity diaphragm tank on all new wells. This will insure a minimum of one (1) minute draw down or one (1) minute refill. If a smaller diaphragm tank is used then we will install a cycle stop valve which will produce the same results.

If you have any questions please feel free to call our office anytime.

Thank you,


Donald D. Hall
DDH/jk


Kenny Townsend
Lot #42

Applicant	Plans Examiner	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	All drawings must be clear, concise and drawn to scale ("Optional " details that are not used shall be marked void or crossed off). Square footage of different areas shall be shown on plans.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Designers name and signature on document (FBC 104.2.1). If licensed architect or engineer, official seal shall be affixed.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Site Plan including:</u> a) Dimensions of lot b) Dimensions of building set backs c) Location of all other buildings on lot, well and septic tank if applicable, and all utility easements. d) Provide a full legal description of property.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Wind-load Engineering Summary, calculations and any details required</u> a) Plans or specifications must state compliance with FBC Section 1606 b) The following information must be shown as per section 1606.1.7 FBC a. Basic wind speed (MPH) b. Wind importance factor (I) and building category c. Wind exposure – if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated d. The applicable internal pressure coefficient e. Components and Cladding. The design wind pressure in terms of psf (kN/m ²), to be used for the design of exterior component and cladding materials not specifically designed by the registered design professional
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Elevations including:</u> a) All sides b) Roof pitch c) Overhang dimensions and detail with attic ventilation d) Location, size and height above roof of chimneys e) Location and size of skylights f) Building height g) Number of stories

Floor Plan including:

- | | | |
|-------------------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | a) Rooms labeled and dimensioned |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | b) Shear walls |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | c) Windows and doors (including garage doors) showing size, mfg., approval listing and attachment specs. (FBC 1707) and safety glazing where needed (egress windows in bedrooms to be shown) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | d) Fireplaces (gas appliance) (vented or non-vented) or wood burning with hearth |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | e) Stairs with dimensions (width, tread and riser) and details of guardrails and handrails |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | f) Must show and identify accessibility requirements (accessible bathroom) |

Foundation Plan including:

- | | | |
|-------------------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | a) Location of all load-bearing wall with required footings indicated as standard Or monolithic and dimensions and reinforcing |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | b) All posts and/or column footing including size and reinforcing |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | c) Any special support required by soil analysis such as piling |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | d) Location of any vertical steel |

Roof System:

- | | | |
|-------------------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | a) Truss package including: <ol style="list-style-type: none">1. Truss layout and truss details signed and sealed by Fl. Pro. Eng.2. Roof assembly (FBC 104.2.1 Roofing system, materials, manufacturer, fastening requirements and product evaluation with wind resistance rating) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | b) Conventional Framing Layout including: <ol style="list-style-type: none">1. Rafter size, species and spacing2. Attachment to wall and uplift3. Ridge beam sized and valley framing and support details4. Roof assembly (FBC 104.2.1 Roofing systems, materials, manufacturer, fastening requirements and product evaluation with wind resistance rating) |

Wall Sections including:

- | | | |
|-------------------------------------|--------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | a) Masonry wall <ol style="list-style-type: none">1. All materials making up wall2. Block size and mortar type with size and spacing of reinforcement3. Lintel, tie-beam sizes and reinforcement4. Gable ends with rake beams showing reinforcement or gable truss and wall bracing details5. All required connectors with uplift rating and required number and size of fasteners for continuous tie from roof to foundation6. Roof assembly shown here or on roof system detail (FBC 104.2.1 Roofing system, materials, manufacturer, fastening requirements and product evaluation with resistance rating)7. Fire resistant construction (if required)8. Fireproofing requirements9. Shoe type of termite treatment (termicide or alternative method)10. Slab on grade<ol style="list-style-type: none">a. Vapor retardant (6mil. Polyethylene with joints lapped 6 inches and sealed)b. Must show control joints, synthetic fiber reinforcement or Welded fire fabric reinforcement and supports11. Indicate where pressure treated wood will be placed12. Provide insulation R value for the following:<ol style="list-style-type: none">a. Attic spaceb. Exterior wall cavityc. Crawl space (if applicable) |
|-------------------------------------|--------------------------|---|

b) Wood frame wall

1. All materials making up wall
2. Size and species of studs
3. Sheathing size, type and nailing schedule
4. Headers sized
5. Gable end showing balloon framing detail or gable truss and wall hinge bracing detail
6. All required fasteners for continuous tie from roof to foundation (truss anchors, straps, anchor bolts and washers)
7. Roof assembly shown here or on roof system detail (FBC104.2.1 Roofing system, materials, manufacturer, fastening requirements and product evaluation with wind resistance rating)
8. Fire resistant construction (if applicable)
9. Fireproofing requirements
10. Show type of termite treatment (termicide or alternative method)
11. Slab on grade
 - a. Vapor retardant (6Mil. Polyethylene with joints lapped 6 inches and sealed)
 - b. Must show control joints, synthetic fiber reinforcement or welded wire fabric reinforcement and supports
12. Indicate where pressure treated wood will be placed
13. Provide insulation R value for the following:
 - a. Attic space
 - b. Exterior wall cavity
 - c. Crawl space (if applicable)

c) Metal frame wall and roof (designed, signed and sealed by Florida Prof. Engineer or Architect)

Floor Framing System:

- a) Floor truss package including layout and details, signed and sealed by Florida Registered Professional Engineer
- b) Floor joist size and spacing
- c) Girder size and spacing
- d) Attachment of joist to girder
- e) Wind load requirements where applicable

Plumbing Fixture layout

Electrical layout including:

- a) Switches, outlets/receptacles, lighting and all required GFCI outlets identified
- b) Ceiling fans
- c) Smoke detectors
- d) Service panel and sub-panel size and location(s)
- e) Meter location with type of service entrance (overhead or underground)
- f) Appliances and HVAC equipment
- g) Arc Fault Circuits (AFCI) in bedrooms

HVAC information

- a) Manual J sizing equipment or equivalent computation
- b) Exhaust fans in bathroom

Energy Calculations (dimensions shall match plans)

Gas System Type (LP or Natural) Location and BTU demand of equipment

Disclosure Statement for Owner Builders

*****Notice Of Commencement Required Before Any Inspections Will Be Done**

Private Potable Water

- a) Size of pump motor
- b) Size of pressure tank
- c) Cycle stop valve if used

☐ NA

☐ NA

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☐ NA
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Hail's Well 1HP

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS

1. **Building Permit Application:** A current Building Permit Application form is to be completed and submitted for all residential projects.
2. **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.
3. **Environmental Health Permit or Sewer Tap Approval:** A copy of the Environmental Health permit, existing septic approval or sewer tap approval is required before a building permit can be issued.
(386) 758-1058 (**Toilet facilities shall be provided for construction workers**)
4. **City Approval:** If the project is to be located within the city limits of the Town of Fort White, prior approval is required. The Town of Fort White approval letter is required to be submitted by the owner or contractor to this office when applying for a Building Permit. (386) 497-2321
5. **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 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 8.8 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 8.7 of the Columbia County Land Development Regulations. **CERTIFIED FINISHED FLOOR ELEVATIONS WILL BE REQUIRED ON ANY PROJECT WHERE THE BASE FLOOD ELEVATION (100 YEAR FLOOD) HAS BEEN ESTABLISHED.**
A development permit will also be required. Development permit cost is **\$50.00**
6. **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.
7. **911 Address:** If the project is located in an area where the 911 address has been issued, then the proper paperwork from the 911 Addressing Department must be submitted. (386) 752-8787

ALL REQUIRED INFORMATION IS TO BE SUBMITTED FOR REVIEW. YOU WILL BE NOTIFIED WHEN YOUR APPLICATION AND PLANS ARE APPROVED AND READY TO PERMIT. PLEASE DO NOT EXPECT OR REQUEST THAT PERMIT APPLICATIONS BE REVIEWED OR APPROVED WHILE YOU ARE HERE – TIME WILL NOT ALLOW THIS –PLEASE DO NOT ASK

NOTICE:

ADDRESSES BY APPOINTMENT ONLY!

TO OBTAIN A 9-1-1 ADDRESS THE REQUESTER MUST CONTACT THE COLUMBIA COUNTY 9-1-1 ADDRESSING DEPARTMENT AT (386) 752-8787 FOR AN APPOINTMENT TIME AND DATE:

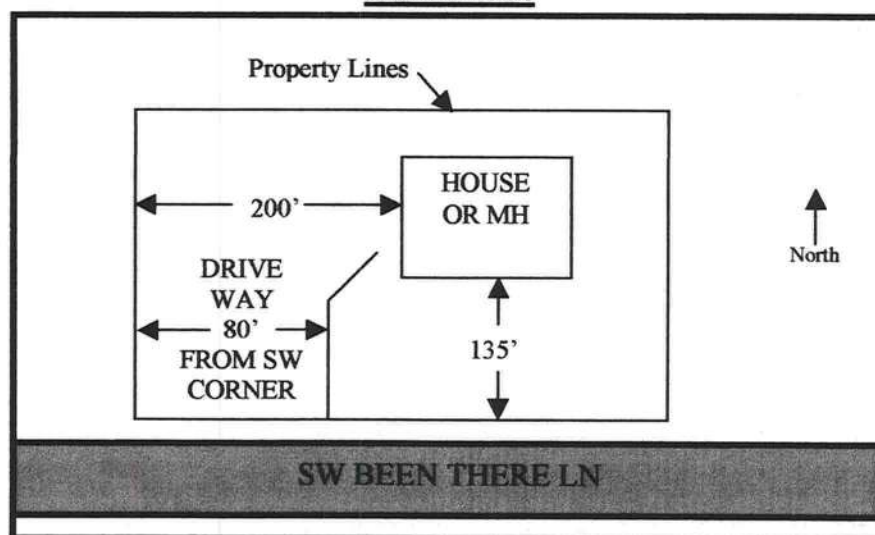
YOU CAN NOT OBTAIN A NEW ADDRESS OVER THE TELEPHONE. MUST MAKE AN APPOINTMENT!

THE ADDRESSING DEPARTMENT IS LOCATED AT 263 NW LAKE CITY AVENUE (OFF OF WEST U.S. HIGHWAY 90 WEST OF INTERSTATE 75 AT THE COLUMBIA COUNTY EMERGENCY OPERATIONS CENTER).

THE REQUESTER WILL NEED THE FOLLOWING:

1. THE PARCEL OR TAX ID NUMBER (SAMPLE: "25-4S-17-12345-123" OR "R12345-123) FOR THE PROPERTY.
2. A PLAT, PLAN, SITE PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
 - a. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
 - b. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
 - c. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



NOTE: 5 TO 7 WORKING DAYS MAY BE REQUIRED IF ADDRESSING DEPARTMENT NEEDS TO CONDUCT AN ON SITE SURVEY.

**Columbia County Building Department
Culvert Permit**

**Culvert Permit No.
000000647**

DATE 05/05/2005 PARCEL ID # 12-4S-16-029394-14
APPLICANT KENNY TOWNSEND PHONE 397-3495
ADDRESS PO BOX 1621 LAKE CITY FL 32056
OWNER EDWARD HENRY PHONE _____
ADDRESS 243 SW INWOOD COURT LAKE CITY FL 32024
CONTRACTOR COLUMBIA HOME IMPROVEMENT PHONE 752-4071
LOCATION OF PROPERTY 90 W L SISTERS WELCOME RD, R CREEKSIDE, R INWARD COURT
LOT 42 ON RIGHT _____

SUBDIVISION/LOT/BLOCK/PHASE/UNIT CREEKSIDE 42

SIGNATURE  _____

INSTALLATION REQUIREMENTS

☒

Culvert size will be 18 inches in diameter with a total length of 32 feet, leaving 24 feet of driving surface. Both ends will be mitered 4 foot with a 4 : 1 slope and poured with a 4 inch thick reinforced concrete slab.

INSTALLATION NOTE: Turnouts will be required as follows:

- a) a majority of the current and existing driveway turnouts are paved, or;
 - b) the driveway to be served will be paved or formed with concrete.
- Turnouts shall be concrete or paved a minimum of 12 feet wide or the width of the concrete or paved driveway, whichever is greater. The width shall conform to the current and existing paved or concreted turnouts.

☐

Culvert installation shall conform to the approved site plan standards.

☐

Department of Transportation Permit installation approved standards.

☐

Other _____

ALL PROPER SAFETY REQUIREMENTS SHOULD BE FOLLOWED
DURING THE INSTALLATION OF THE CULVERT.

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

Amount Paid 25.00



**STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT**

-----PART II - SITEPLAN-----

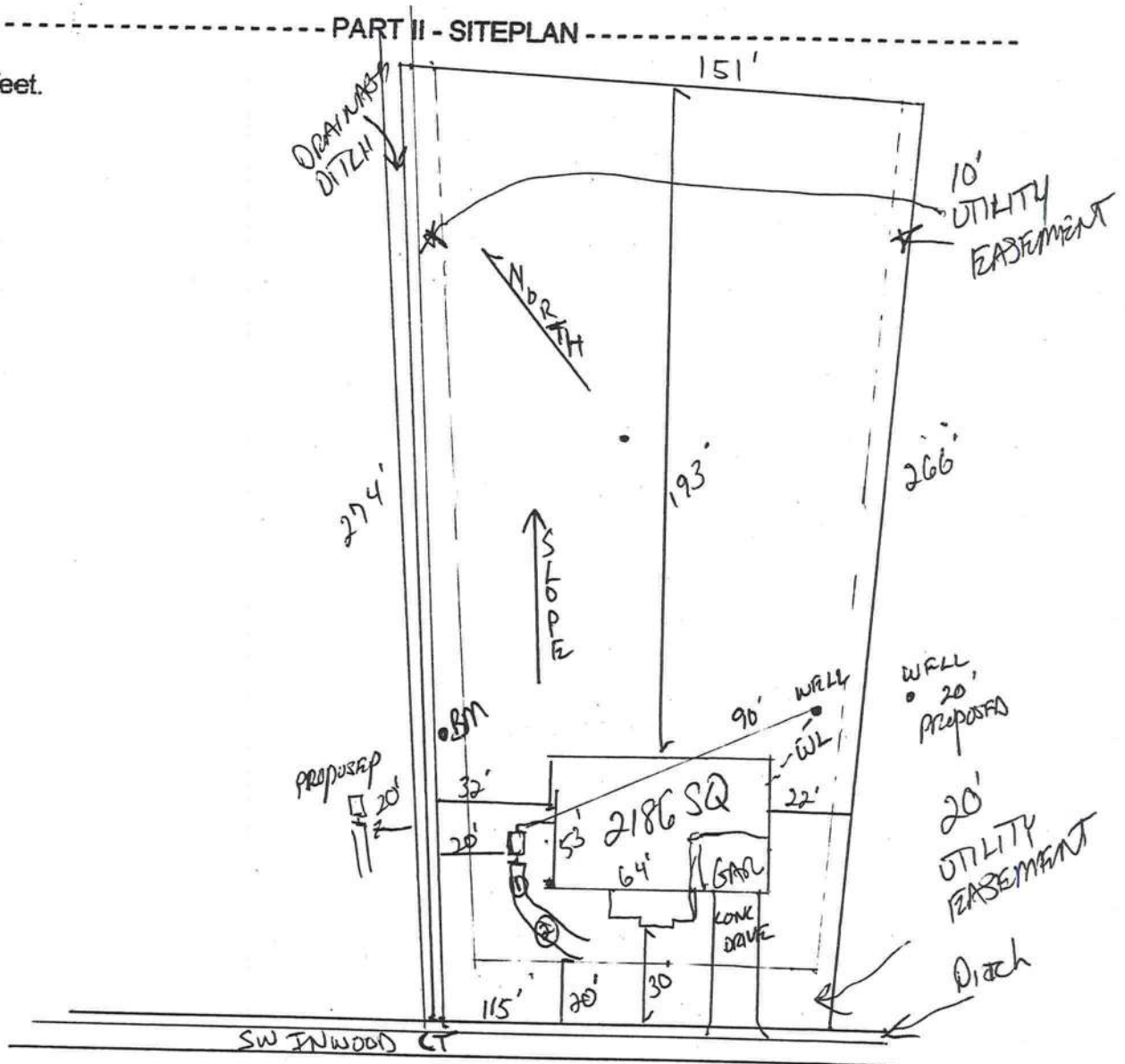
[illegible]

By _____ County Health Department

Page 2 of 4

Permit Application Number 05-0474

Scale: 1 inch = 50 feet.



Notes:

Site Plan submitted by:

Plan Approved

By _____

Not Approved

MASTER CONTRACTOR

Date _____

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

COLUMBIA COUNTY, FLORIDA

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 12-4S-16-02939-142

Building permit No. 000023108

Use Classification SFD, UTILITY

Fire: 65.12

Permit Holder COLUMBIA HOME BUILDERS

Waste: 134.75

Owner of Building EDWARD HENRY

Total: 199.87

Location: 243 SW INWOOD COURT(CREEKSIDE, LOT 42)



Date: 11/16/2005


Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

THIS INSTRUMENT WAS PREPARED BY:

TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

RETURN TO:

TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

PERMIT NO.

Inst: 2005013664 Date: 06/10/2005 Time: 09:07
YMK DC, P. DeWitt Cason, Columbia County B: 1048 P: 1535

TAX FOLIO NO.: 12-4S-16-02939-142

New Construction Subterranean Termite Soil Treatment Record

OMB Approval No. 2502-0525
(exp. 10/31/2005)

This form is completed by the licensed Pest Control Company.

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information is mandatory and is required to obtain benefits. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

Section 24 CFR 200.926d(b)(3) requires that the sites for HUD insured structures must be free of termite hazards. This information collection requires the builder to certify that an authorized Pest Control company performed all required treatment for termites, and that the builder guarantees the treated area against infestation for one year. Builders, pest control companies, mortgage lenders, homebuyers, and HUD as a record of treatment for specific homes will use the information collected. The information is not considered confidential.

This report is submitted for informational purposes to the builder on proposed (new) construction cases when soil treatment for prevention of subterranean termite infestation is specified by the builder, architect, or required by the lender, architect, FHA, or VA.

All contracts for services are between the Pest Control Operator and builder, unless stated otherwise.

23108

Section 1: General Information (Treating Company Information)

Company Name: Aspen Pest Control, Inc.
Company Address: 301 NW Cole Terrace City: Lake City State: FL Zip: 32055
Company Business License No.: JB109476 Company Phone No.: 386-755-3611
FHA/VA Case No. (if any): _____

Section 2: Builder Information

Company Name: Columbia Home Builders Company Phone No.: _____

Section 3: Property Information

Location of Structure(s) Treated (Street Address or Legal Description, City, State and Zip): 243 S.W. Inwood Ex.

Type of Construction (More than one box may be checked) ☒ Slab ☐ Basement ☐ Crawl ☐ Other _____
Approximate Depth of Footing: Outside 12 Inside 24 Type of Fill DIRT

Section 4: Treatment Information

Date(s) of Treatment(s): 5-23-05
Brand Name of Product(s) Used: Surround
EPA Registration No.: 10907-7-53843
Approximate Final Mix Solution %: 0.5%
Approximate Size of Treatment Area: Sq. ft. 2974 Linear ft. 174 Linear ft. of Masonry Voids 178
Approximate Total Gallons of Solution Applied: 584
Was treatment completed on exterior? ☐ Yes ☒ No
Service Agreement Available? ☒ Yes ☐ No

Note: Some state laws require service agreements to be issued. This form does not preempt state law.

Attachments (List): _____

Comments: _____

Name of Applicator(s): Steve Brennan Certification No. (if required by State law): JB104376

The applicator has used a product in accordance with the product label and state requirements. All treatment materials and methods used comply with state and federal regulations.

Authorized Signature: [Signature] Date: 5-23-05

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Form NPCA-99-B may still be used

form HUD-NPCA-99-B (04/2003)

23100



BRITT SURVEYING

830 West Duval Street • Lake City, FL 32055
Phone (386) 752-7163 • Fax (386) 752-5573

Land Surveyors
and Mappers

05/20/05

L-16164

To Whom It May Concern:

C/o: Kenny Townsend

Re: Lot 42 Creekside

The elevation of the floor is found to be 135.03 feet. The minimum floor elevation is established to be 131.00 feet as per the plat of record. The highest adjacent grade is 132.62 feet and the lowest adjacent grade is 130.20 feet. The elevations shown hereon are based on NGVD 29 datum.

L. Scott Britt
PLS #5757