STY STATE OF THE S	oia County Building Permit PERMIT
This Perm APPLICANT DAVID A. MCKINZEY	nit Expires One Year From the Date of Issue 000023118 PHONE 386.454.3691
ADDRESS 399 SW CR 138	FT. WHITE FL 32038
OWNER DAVID A. MCKINZEY	PHONE 386.454.3691
ADDRESS 399 SW CR 138	FT. WHITE FL 32038
CONTRACTOR DAVID A. MCKINZEY	PHONE 386.454.3691
LOCATION OF PROPERTY 47-S TO U	S 27 TO FT. WHITE TO C-138,TR 1/4 MILE ON R.
TYPE DEVELOPMENT ADDITION TO SE	FD ESTIMATED COST OF CONSTRUCTION 22500.00
HEATED FLOOR AREA 450.00	TOTAL AREA450.00
FOUNDATION CONC WALL	LS FRAMED ROOF PITCH 3'12 FLOOR CONC
LAND USE & ZONING A-3	MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-F	FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE	X DEVELOPMENT PERMIT NO.
PARCEL ID 30-7S-17-10068-008	SUBDIVISION SASSAFRAS ACRES
LOT 8 BLOCK PHASE _	UNIT TOTAL ACRES
	- A A Chall
	ontractor's License Number Applicant/Owner/Contractor
EXISTING 05-0069-E	BLK
Driveway Connection Septic Tank Number	LU & Zoning checked by Approved for Issuance New Resident
COMMENTS: NOC ON FILE	
1 FOOT ABOVE OAD.	Check # or Cash 2573
FOR BUI	ILDING & ZONING DEPARTMENT ONLY
	(Tooter/Slab)
Temporary Power date/app. by	Foundation Monolithic
Temporary Power	Foundation Monolithic date/app. by
Temporary Power date/app. by Under slab rough-in plumbing date/app.	Foundation Monolithic date/app. by Slab Sheathing/Nailing
Temporary Power date/app. by Under slab rough-in plumbing date/app. Framing	Foundation Monolithic date/app. by date/app. by Slab Sheathing/Nailing by date/app. by date/app. by Rough-in plumbing above slab and below wood floor
Temporary Power date/app. by Under slab rough-in plumbing date/app. Framing date/app. by Electrical rough-in	Foundation Monolithic date/app. by date/app. by
Temporary Power date/app. by Under slab rough-in plumbing date/app. Framing date/app. by Electrical rough-in	Foundation Monolithic date/app. by date/app. by Slab Sheathing/Nailing by date/app. by date/app. by Rough-in plumbing above slab and below wood floor date/app. by Heat & Air Duct Peri. beam (Lintel)
Temporary Power date/app. by Under slab rough-in plumbing date/app. Framing date/app. by Electrical rough-in date/app. by Permanent power	Foundation Monolithic date/app. by date/app. by
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Temporary Power date/app. by Under slab rough-in plumbing Framing date/app. by Electrical rough-in date/app. by Permanent power date/app. by M/H tie downs, blocking, electricity and plumbing Reconnection M/H Pole date/app. by Trave Trave BUILDING PERMIT FEE \$ 115.00	Foundation Monolithic date/app. by date/app. by Slab Sheathing/Nailing date/app. by Rough-in plumbing above slab and below wood floor Heat & Air Duct Peri. beam (Lintel) date/app. by C.O. Final Culvert date/app. by date/app. by Pool date/app. by Pump pole date/app. by Pump pole date/app. by El Trailer date/app. by CERTIFICATION FEE \$ 2.25 SURCHARGE FEE \$ 2.25
Temporary Power date/app. by	Foundation Monolithic date/app. by date/app. by Slab Sheathing/Nailing date/app. by Rough-in plumbing above slab and below wood floor date/app. by Heat & Air Duct Peri. beam (Lintel) date/app. by C.O. Final Culvert date/app. by date/app. by Pool date/app. by Pump pole Utility Pole date/app. by Pump pole Trailer Re-roof date/app. by CERTIFICATION FEE \$ 2.25 SURCHARGE FEE \$ 2.25 EERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$
Temporary Power date/app. by Under slab rough-in plumbing date/app. Framing date/app. by Electrical rough-in date/app. by Permanent power date/app. by M/H tie downs, blocking, electricity and plumbing date/app. by M/H Pole date/app. by Trave date/app. by BUILDING PERMIT FEE \$ 115.00 Commission Commission	Foundation Monolithic date/app. by Sheathing/Nailing Sheathing/Nailing date/app. by Sheathing/Nailing date/app. by Rough-in plumbing above slab and below wood floor date/app. by Heat & Air Duct Peri. beam (Lintel) date/app. by C.O. Final Culvert date/app. by date/app. by Pool date/app. by Pool date/app. by Pump pole Utility Pole date/app. by El Trailer Re-roof date/app. by CERTIFICATION FEE \$ 2.25 SURCHARGE FEE \$ 2.25 ERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$ CULVERT FEE \$ 169.50
Temporary Power date/app. by	Foundation Monolithic date/app. by date/app. by Slab Sheathing/Nailing date/app. by Rough-in plumbing above slab and below wood floor date/app. by Heat & Air Duct Peri. beam (Lintel) date/app. by C.O. Final Culvert date/app. by date/app. by Pool date/app. by Pump pole Utility Pole date/app. by Pump pole Trailer Re-roof date/app. by CERTIFICATION FEE \$ 2.25 SURCHARGE FEE \$ 2.25 EERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$

"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 INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

Monday (Allene Columbia County Building Permit Application Revised 9-23-04 Application # 0504-48 Date Received 4/14/05 By JL Permit # For Office Use Only Date <u>62.05.05</u> Plans Examiner <u>6 & 57 //</u> Date <u>4-19-05</u> Application Approved by - Zoning Official **Development Permit** Zoning Land Use Plan Map Category **Applicants Name** Address Phone 386 **Owners Name** 911 Address **Contractors Name** Phone Address Fee Simple Owner Name & Address Bonding Co. Name & Address_ Architect/Engineer Name & Address Mortgage Lenders Name & Address Circle the correct power company - FL Power & Light - Clay Elec - Suwannee Valley Elec. --75-17-10068-008 Estimated Cost of Construction **Subdivision Name** Unit Phase Driving Directions Hwy Type of Construction Number of Existing Dwellings on Property Total Acreage 🌊 Lot Size Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Actual Distance of Structure from Property Lines - Front 264 Side 35 Side // Total Building Height Number of Stories ____ Heated Floor Area 1900 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 COMMENCMENT 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) Contractor Signature Contractors License Number STATE OF FLORIDA **Competency Card Number** COUNTY OF COLUMBIA NOTARY STAMP/SEAL Sworn to (or affirmed) and subscribed before me day of

Notary Signature

Personally known____ or Produced Identification_



MATIONAL FLOOD INSURANCE PROGRAM

FIRM FLOOD INSURANCE RATE MAP

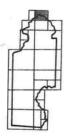
COLUMBIA

COLUMBIA

COLUMBIA

PANEL 270 OF 290

PANEL LOCATION



COMMUNITY-PANEL NUMBER
120070 0270 B
131AQ EFFECTIVE DATE:

8861 ,8 YAAUNAL



Federal Emergency Management Agency

FORM 600B-01

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION Residential Component Prescriptive Method B

NORTH 123

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. AND ADDRESS: 399 SW CR 138

BUILDER:

GENERAL DIRECTIONS 1. New construction including additions which incorporates any of the following features course associated in the control of the control	
 New construction including additions which incorporates any of the following features cannot comply using this met Choose one of the component packages "A" through "E" fromTable 6B-1 by which you intend to comply with the Column on Table 5B.1 by which you intend to comply the Column on Table 5B.1 by which you intend to comply the Column on Table 5B.1 by which you intend to comply the Column on Table 5B.1 by which you intend to comply the Column on Table 5B.1 by which you intend to comply the Column on Table 5B.1 by	thod: steel stud walls, single assembly roof/ceiling construction, or skylights or other non-vertical roof gl
The special operation of the controlled controlled the present the property of the present	De Installed" values must be equal to or more efficient than the required levels
Read "Minimum Requirements for All Packages". Table 68-2 and check each box to indicate your intest to see the	ALCOHOL PLANTS
. Read, sign and date the "Prepared By" certification statement at the bottom of page 1. The owner or owner's agent	with all applicable items. must also sign and date the form
	The state of the s
. Compliance package chosen (A-F)	Please Print
. New construction or addition	1. A 164 5
. Single family detached or Multifamily attached	2. Addition 3. Sinclo
. If Multifamily—No. of units covered by this submission	3. <u>31 ne 10</u>
. Is this a worst case? (yes / no)	5.
. Conditioned floor area (sq. ft.)	6.
. Predominant eave overhang (ft.)	7. 21
. Glass type and area :	Single Pane Double Pane
a. Clear glass	8a sq. ft sq. ft.
b. Tint, film or solar screen	8b. — sq ft — sq ft
Percentage of glass to floor area	9. 409 %
0. Floor type, area or perimeter, and insulation:	
a. Slab on grade (R-value)	10a. R= <u>O</u> lin. ft.
b. Wood, raised (R-value)	10b. R= sq. ft
c. Wood, common (R-value) d. Concrete, raised (R-value)	10c. R= sq. ft.
d. Concrete, raised (R-value) e. Concrete, common (R-value)	10d. R= sq. ft.
1. Wall type, area and insulation:	10e. R= sq. ft
a. Exterior: 1. Masonry (Insulation R-value)	
Wood frame (Insulation R-value)	11a-1 R= sq. ft
b. Adjacent: 1. Masonry (Insulation R-value)	11a-2 R= 19 sq. ft. sq. ft.
2. Wood frame (Insulation R-value)	11h 0 D 3q. n
2. Ceiling type, area and insulation:	11b-2 R= sq. ft
a. Under attic (Insulation R-value)	12a. R= 30 sq ft
b. Single assembly (Insulation R-value)	34.16
. Air Distribution System: Duct insulation, location	12b. R= sq. ft
Test report (attach if required)	14a. Type: Central
. Cooling system	14b. SEER/EER: 13
(Types: central, room unit, package terminal A.C., gas, none)	14c. Capacity:
. Heating system:	15a. Type:
(Types: heat pump, elec. strip, nat. gas, L.P. gas, gas h.p., room or PTAC, no	ne) 15b. HSPF/COP/AFUE:
Hot water eveters	15c. Capacity:
Hot water system:	116a Type:
(Types: elec., nat. gas, L.P. gas, solar, heat rec., ded. heat pump, other, non	e) 16b. EF:

FLORIDA BUILDING CODE — BUILDING



STATE OF FLORIDA

DEPARTMENT OF HEALTH APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 05-0069 --- PART II - SITE PLAN--Scale: Each block represents 5 feet and 1 inch = 50 feet. Notes:

Site Plan submitted by:

Plan Approved

7- ESI- COLUMBIA

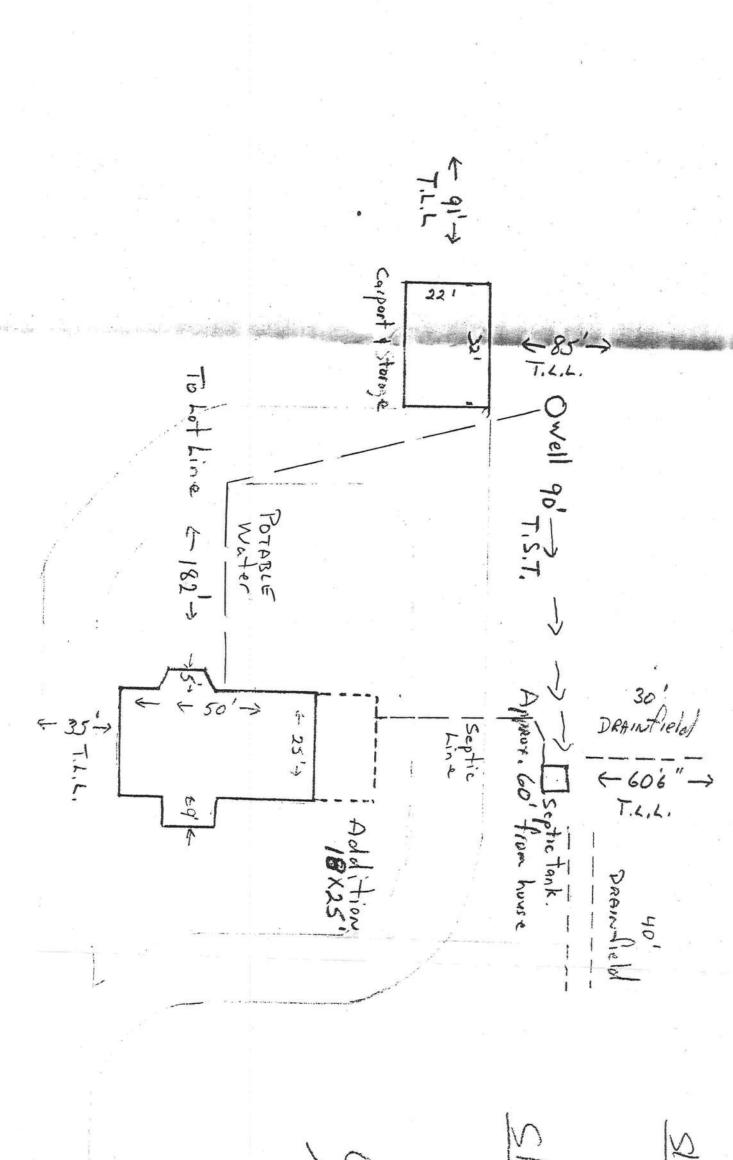
Not Approved

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 10/96 (Replaces HRS-H Form 4015 which may be used) (Stock Number: 5744-002-4015-6)

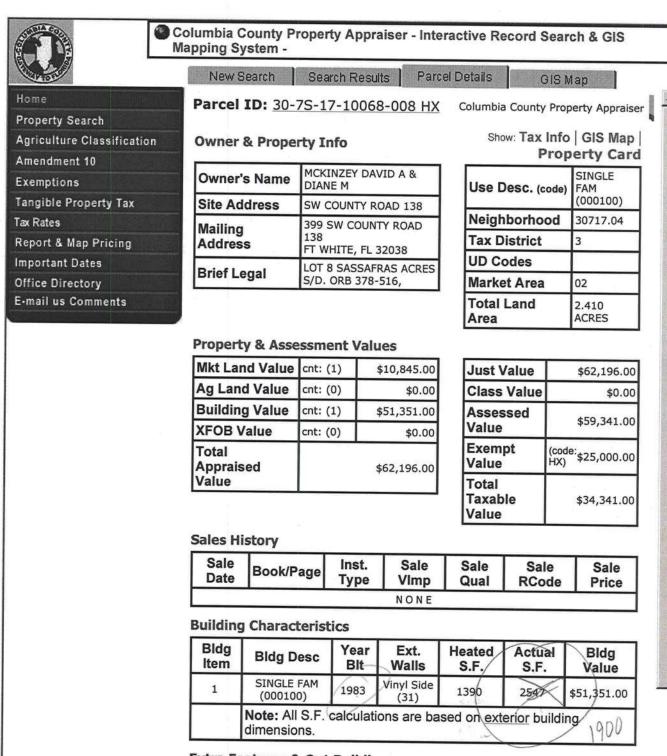
Page 2 of 3



318.46

E

200



Extra	Features	&	Out	Buildings
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Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
				NONE		

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000100	SFR (MKT)	2.410 AC	1.00/1.00/1.00/1.00	\$4,500.00	\$10,845.00

Columbia County Property Appraiser

DB Last Updated: 06/21/2004

1 of 1

DISCLOSURE STATEMENT

FOR OWNER/BUILDER WHEN ACTING AS THER OWN CONTRACTOR AND CLAIMING EXEMPTION OF CONTRACTOR LICENSING REQUIREMENTS IN ACCORDANCE WITH FLORIDA STATUTES, ss. 489.103(7).

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$25,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. You may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations

or and all the state of the sta						
	() Single Family Dwelling () Farm Outbuilding () New Construction	TYPE OF CONS		() Two-Family Residence () Other Modification or other Improvement		
	11011	489.103(7) allowing	e been advised uilder. I agree this exception	of the above disclosure statement		
	Signature A M/2	55	y / y / Date	5		
	I hereby certify that the above listed Florida Statutes ss 489.103(7). Date 4-14-05 Building	FOR BUILDING d owner/builder has g Official/Represent	been notified (of the disclosure statement in		
				·		

#23118

Notice of Preventative Treatments for Termites (as required by Florida Building Code (FBC) 104.2.6)

EDWARDS PEST CONTROL, 386 454 3051 241 SE HARDIN COURT, HIGH SPRINGS, FL, 32643

6/30/05	4:00 pm	Sin Railey
Product Used Ch	Imidaclopard emical used (active ingredient)	50 9ALS Number of gallons applied
Percent Concentration	450 09- H. Area treated (square Det)	Linear feet treated
Stage of treatment (Horizon	tal, Vertical, Adjoining Slatz retres	at of disturbed area)

Stage of treatment (Florizontal, Vertical, Adjoining Slab, retreat of disturbed area)

As per 104.2.6 – If soil chemical barrier method for termite prevention is used, final exterior treament shall be completed prior to final building approval.

If this notice is for the final exterior treatment, initial and date this line____