

DATE 09/01/2005

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000023565

APPLICANT GERALD HAEVEY PHONE 352-472-4468
ADDRESS 25108 NW 68TH LANE HIGH SPRINGS FL 32643
OWNER RODNEY & DANAY HARVEY PHONE 352-745-1758
ADDRESS 125 SW LANK TREE GLEN FORT WHITE FL 32038
CONTRACTOR GERALD HARVEY PHONE 352-472-4468
LOCATION OF PROPERTY 47 S, L 27, L INTO HOLLINGSWORTH ESTATES ON BRIGHTON COURT
R LANK TREE GLEN, 1ST LOT ON LEFT
TYPE DEVELOPMENT SFD, UTILITY ESTIMATED COST OF CONSTRUCTION 76950.00
HEATED FLOOR AREA 1539.00 TOTAL AREA 2324.00 HEIGHT .00 STORIES 1
FOUNDATION CONCRETE WALLS FRAMED ROOF PITCH 6/12 FLOOR SLAB
LAND USE & ZONING TOWN OF FT WHITE MAX. HEIGHT _____
Minimum Set Back Requirments: STREET-FRONT REAR SIDE
NO. EX.D.U. 0 FLOOD ZONE FW DEVELOPMENT PERMIT NO. _____

PARCEL ID 34-6S-16-04059-241 SUBDIVISION HOLLINGSWORTH ESTATES
LOT 1 BLOCK C PHASE _____ UNIT _____ TOTAL ACRES .50

CRC058134
Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____
FORT WHITE 05-0859-N BK _____
Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: TOWN OF FORT WHITE LETTER ON FILE
LETTER OF AUTHORIZATION GIVEN _____

Check # or Cash 2270

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 \$ 385.00 CERTIFICATION FEE \$ 11.62 SURCHARGE FEE \$ 11.62
MISC. FEES \$.00 ZONING CERT. FEE \$ _____ FIRE FEE \$ _____ WASTE FEE \$ _____
FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ _____ TOTAL FEE 408.24

INSPECTORS OFFICE L.H.A. CLERKS OFFICE CH

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

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

This Permit Must Be Prominently Posted on Premises During Construction

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

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

Columbia County Building Permit Application

Revised 9-23-04

For Office Use Only Application # 0508-67 Date Received 8/16/05 By G Permit # 05/23565
 Application Approved by - Zoning Official _____ Date _____ Plans Examiner OK JTH Date 8-19-05
 Flood Zone _____ Development Permit _____ Zoning _____ Land Use Plan Map Category _____
 Comments _____

City Water
Jaynice Gerald Harvey
 Applicants Name Harvey Bldg + Const. Inc. Phone 352-472-4468
 Address 25108 N.W. 68th Lane High Springs, FL 32643
 Owners Name Rodney + Daray Harvey Phone 352-745-1758
 911 Address 125 SW Lanktree Gun Club Ft White, FL 32038
 Contractors Name Harvey Bldg + Const. Phone 352-472-4468
 Address 25108 N.W. 68th Lane High Springs, FL 32643
 Fee Simple Owner Name & Address N/A
 Bonding Co. Name & Address N/A
 Architect/Engineer Name & Address Ron Barlow - 4321 N.W. 18th Pl Gainesville, FL 32606
 Mortgage Lenders Name & Address Tri County Bank - 530 East Wade St Trenton, NJ 08611
 Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Energy
 Property ID Number 34-65-16-04059-241 Estimated Cost of Construction \$73,600
 Subdivision Name Hollingsworth Estates Lot 1 Block C Unit _____ Phase _____
 Driving Directions 75 South to 47 South go to stop light in Fort White turn left on to 27 South go to Hollingsworth Estates on left Brighton Court turn right on to Lanktree Glen 1st Lot on left.
 Type of Construction wood frame + concrete slab Number of Existing Dwellings on Property 0
 Total Acreage 1/2 Lot Size _____ Do you need a Culvert Permit or Culvert Waiver or Have an Existing Drive
 Actual Distance of Structure from Property Lines - Front 31 ft Side 80 ft Side 80 ft Rear 19 ft
 Total Building Height 16 feet Number of Stories 1 Heated Floor Area 1539 Roof Pitch 6/12
Porch 291 GARAGE 494 TOTAL 2324

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.

Harvey Bldg + Const. Inc.

Owner Builder or Agent (Including Contractor) DEANNA D. HART

STATE OF FLORIDA
COUNTY OF COLUMBIA

Notary Public, State of Florida
My comm. exp. Mar. 29, 2009
Comm. No. DD 391961

Sworn to (or affirmed) and subscribed before me

this 22nd day of July 2005.

Personally known ☒ or Produced Identification _____

Deanna D. Hart
Contractor Signature

Contractors License Number _____

Competency Card Number _____

NOTARY STAMP/SEAL

Deanna D. Hart
Notary Signature

352.215.0115

- 8-31-05 -

I GERALD E. HARVEY O F
HARVEY BLDG. & CONST. INC.
give OK for SANICE D. HARVEY
O F HARVEY BLDG & CONST INC TO
SIGN & PICK UP PERMITS FOR
ME.

Gerald E Harvey



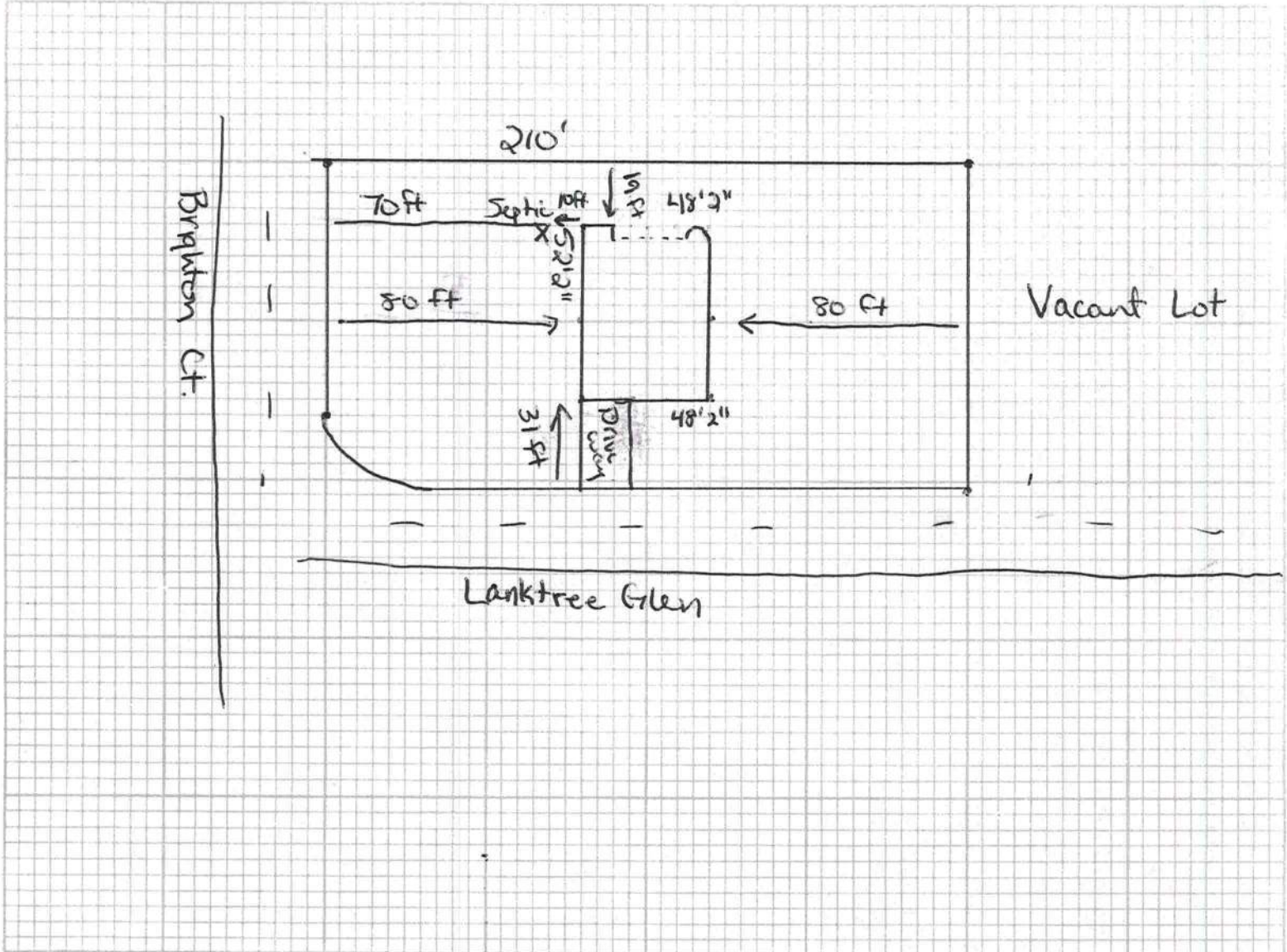
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 050859N

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: LOT 1, BIKC. Hollingsworth Estates
City Water

Site Plan submitted by: Dang Han Signature
Plan Approved Mark S. Zander Not Approved _____
By _____ Columbia County Health Department
Owner _____ Title
Date 8-30-05

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Town of Fort White

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

TOWN OF FORT WHITE APPLICATION FOR BUILDING PERMIT

\$25.00 FEE

PERMIT #: _____

DATE: 8-16-05

Applicant's Name: Danney + Rodney Harvey Phone: 352-745-2145

Address: PO Box 891 Newberry FL 32669

Owner's Name: Danney + Rodney Harvey Phone: 352-745-2145

Address: PO Box 891 Newberry FL 32669

Contractor's Name: Harvey Building + Construction - Gerald Harvey

Address: 25108 NW 68th Lane, High Springs, FL 32643

****Location of property: 125 SW Lanktree Glen
Ft White, FL

****Type of development: Single Family Res

Land use & zoning: _____
Minimum set-back: Street-front/side 30 rear 15 side 15

Legal Description (acres): 2.5 acres
lot 1 block c Hollingsworth estates

I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction and that all the foregoing information is accurate and all work will be done in compliance with all laws regulating construction and zoning.

CRC058134
Contractor's License Number

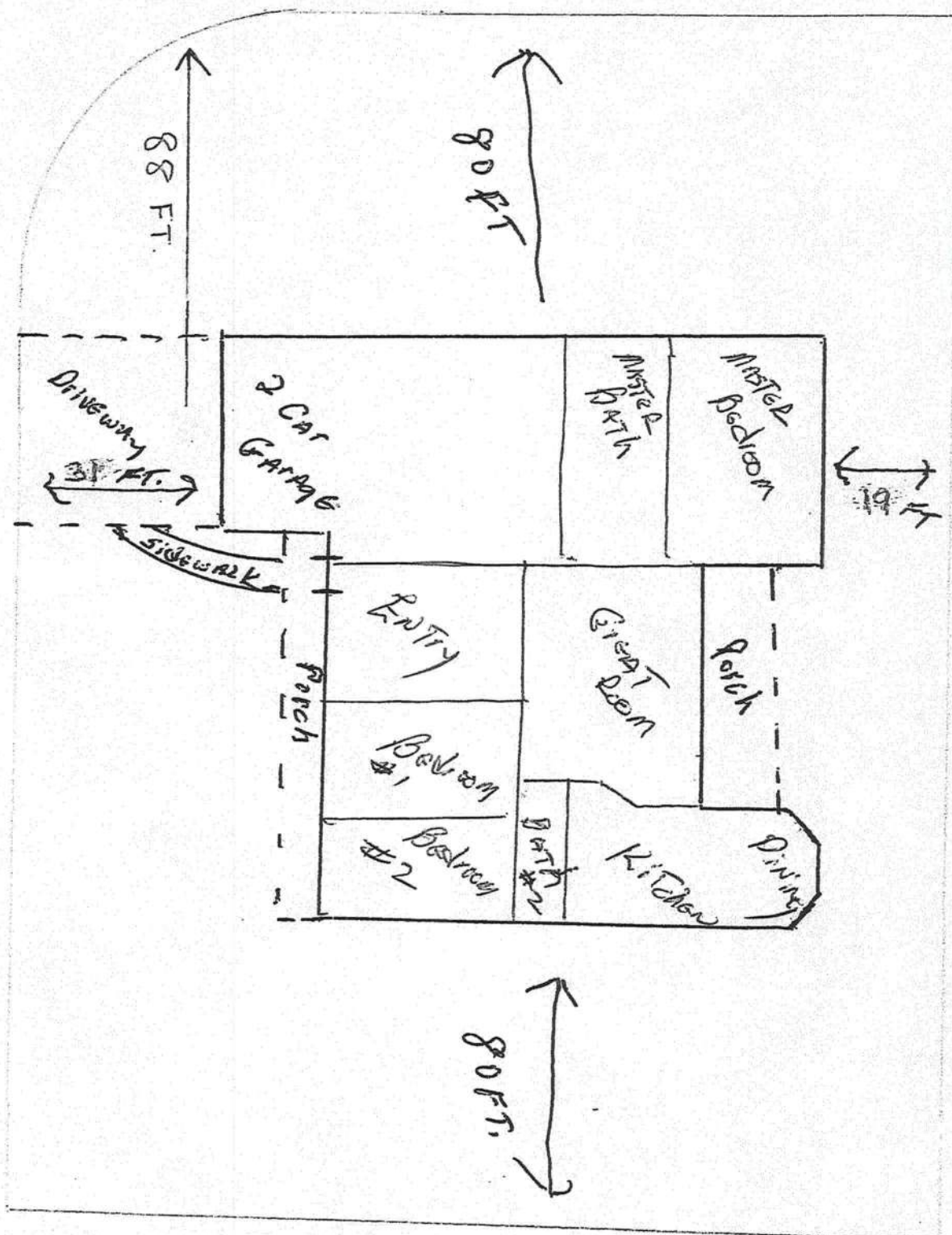
8-16-05
Date

Janice Harvey
Applicant/Owner Contractor
Janice E. Revels
Approved by Janice E. Revels, Town Clerk KE

****IF PROPERTY IS NOT OWNED BY APPLICANT, A STATEMENT FROM THE OWNER AUTHORIZING USE OF PROPERTY FOR THE TYPE OF DEVELOPMENT STATED ON THIS APPLICATION WILL BE REQUIRED.

Equal Opportunity Employer

FT. WHITE



Site Plan

210 FT.

Builder Harvey Bldg. & Const. INC.

352-472-4

PARCEL ID# 34-6S-16-04059-209/241
BUYER'S TIN#

WARRANTY DEED

THIS INDENTURE, Made this 16th day of August, 2005, BETWEEN HARVEY BUILDING & CONSTRUCTION, INC., a Florida Corporation grantor whose address is 25108 NW 68TH LANE, HIGH SPRINGS, FL 32643, and RODNEY HARVEY and DANAY HARVEY, HUSBAND AND WIFE grantee, whose post-office address is: 25108 NW 68 LANE, HIGH SPRINGS, FL 32643.

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

WITNESSETH: That 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 1, Block C, of HOLLINGSWORTH ESTATES, a subdivision according to plat thereof recorded in Plat Book 5, Page 122, of the Public Records of Columbia County, Florida.

C#1822682

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#L05011101099

DATE	BATCH NUMBER	LICENSE NBR
1/11/2005	040435938	CRC058134

The RESIDENTIAL CONTRACTOR

Named below IS CERTIFIED

Under the provisions of Chapter 489 FS.

Expiration date: AUG 31, 2006

HARVEY, GERALD E
HARVEY BUILDING & CONSTRUCTION INC
25401 NW 68TH LN
HIGH SPRINGS FL 32643JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

L822752

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#L05011100170

DATE	BATCH NUMBER	LICENSE NBR
/11/2005	040535558	QB37386

he BUSINESS ORGANIZATION

amed below IS QUALIFIED

nder the provisions of Chapter 489 FS.

xpiration date: AUG 31, 2005

THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS
OMPANY TO DO BUSINESS ONLY IF IT HAS A QUALIFIER.)ARVEY BUILDING & CONSTRUCTION INC
5108 NW 68TH LANE
IGH SPRINGS FL 32643JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

ACORD™ CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 03/03/2005
PRODUCER (352)493-2565 FAX (352)493-0402 Nature Coast Insurance, Inc. 1515 North Young Blvd P O Box 1520 Chiefland, FL 32644		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURED Harvey Building & Construction, Inc. 25401 SW 17th Ave Newberry, FL 32669		INSURERS AFFORDING COVERAGE INSURER A: Auto Owners Insurance Company INSURER B: INSURER C: INSURER D: INSURER E:
		NAIC #

COVERAGES

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

INSR LTR	ADD'L INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	014612-20597061-05	02/15/2005	02/15/2006	EACH OCCURRENCE	\$ 300,000
		DAMAGE TO RENTED PREMISES (Ea occurrence)				\$ 50,000	
		MED EXP (Any one person)				\$ 5,000	
		PERSONAL & ADV INJURY				\$ 300,000	
		GENERAL AGGREGATE	\$ 300,000				
						PRODUCTS - COMPIOP AGG	\$ 300,000
		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 EA ACC	\$
						AUTO ONLY: AGG	\$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
							\$
							\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER				WC STATU-TORY LIMITS	OTH-ER
						E.L. EACH ACCIDENT	\$
						E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$

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

Residential Carpentry 3 Stories or Less

CERTIFICATE HOLDERAlachua County Building Department
120 South Main Street
Gainesville, FL 32602**CANCELLATION**

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

AUTHORIZED REPRESENTATIVE

Shirley Miller



10-20-2004

TOM GALLAGHER
CHIEF FINANCIAL OFFICER

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

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

CONSTRUCTION INDUSTRY EXEMPTION

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

EFFECTIVE DATE: 11/03/2004

**** EXPIRATION DATE:** 11/03/2006

PERSON: HARVEY GERALD E

FEIN: 200406871

BUSINESS NAME AND ADDRESS: HARVEY BUILDING & CONSTRUCTION INC
25108 NW 68TH LANE
HIGH SPRINGS FL 32643

SCOPE OF BUSINESS OR TRADE: 1 - CERTIFIED BUILDING CONTRACTOR

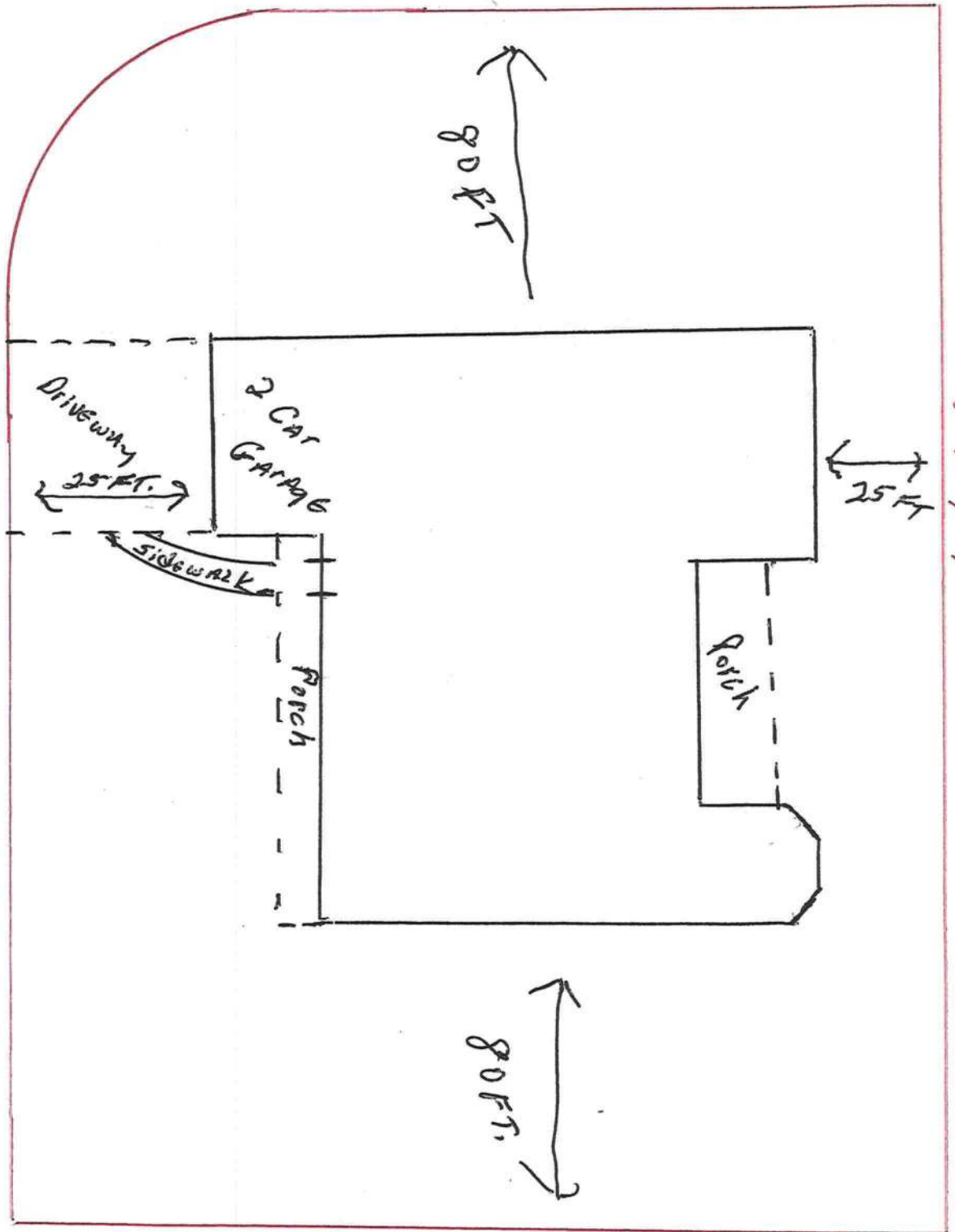
IMPORTANT: Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter .

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

QUESTIONS? (850) 413-1609

HOLLINGWORTH ESTATES LOT 1 BLK C
FT. WHITE

SITE PLAN



25 FT.

Builder HARVEY Bldg. & CONST. INC.

352-472-4

From: The Columbia County Building Department
Plans Review
135 NE Hernando Av.
P. O Box 1529
Lake City Florida, 32056-1529

Reference to: Build permit application Number: **0508-67 Harvey**
Building & Construction Inc. Owner Rodney
Harvey Lot 1 Block C of Hollingsworth
Estates

On the date of August 18, 2005 application 0508- 67and plans for construction of a single family dwelling were reviewed and the following information or alteration to the plans will be required to continue processing this application. If you should have any question please contact the above address, or contact phone number (386) 758-1163 or fax any information to (386) 754-7088.

Please include application number 0508-67 when making reference to this application.

1. The notice of commencement which was submitted with this application needs to be recorded with the Columbia County Clerk of the Courts Office before any inspections can be done on this dwelling.

L.H. DELETE 2. On the elevation plan show the Termination height of the chimneys which shall extend at least 2 feet (610 mm) higher than any portion of a building within 10 feet (1048 mm), but shall not be less than 3 feet (914 mm) above the highest point where the chimney passes through the roof.

3. On the elevation plan show the total height (in feet & inches) of the dwelling from the establish grade to the roof peak.

J.A. DELETE 4. Please verify that the window in bathroom #2 meet the following code requirements. Glazing in an individual fixed or operable panel meets all of the following conditions:

Exposed area of an individual pane greater than 9 square feet (0.836 m²).

Bottom edge less than 18 inches (457 mm) above the floor.

Top edge greater than 36 inches (914 mm) above the floor.

One or more walking surfaces within 36 inches (914 mm) horizontally of the glazing.

4. Please submit the following information for the fireplace (gas appliance) (vented or non-vented) or wood burning with hearth height and width.

5. Please verify the porch floor elevation to meet the requirements of FBC Section 312.1

Porches, balconies or raised floor surfaces located more than 30 inches (762 mm) above the floor or grade below shall have guards not less than 36 inches (914 mm) in height. Open sides of stairs with a total rise of more than 30 inches (762 mm) above the floor or grade below shall have guards not less than 34 inches (864 mm) in height measured vertically from the nosing of the treads. Show a detail drawing of this guard system.

6. Show the method of fireblocking required in section R602.8 of FBC.

Fireblocking shall be provided to cut off all concealed draft openings (both vertical and horizontal) and to form an effective fire barrier between stories, and between a top story and the roof space.

7. Please have a soil testing company perform soil test to verify that the soils bearing capacity meets the required bearing capacity of 1500 PSI as required in the construction (note #4) in Mr. Ron Barlow, P.E. Structural design report for this dwelling.

8. Show on the plans the type of termite treatment (termiticide or alternative method) that will be used as a termite treatment for the dwelling.

Dursban Soil Treatment

Arch Fault Recap on Bedrooms

9. On the electrical plan show the following required electrical layout including:

Switches, outlets/receptacles, lighting and all required GFCI outlets identified.

Smoke detectors when more than one smoke alarm is required to be installed within an individual dwelling unit the alarm devices shall be interconnected in such a manner that the actuation of one alarm will activate all of the alarms in the individual unit. The alarm shall be clearly audible in all bedrooms over background noise levels with all intervening doors closed. The location of the service panel and sub-panel size and location(s) include the amperage rating of the panels.

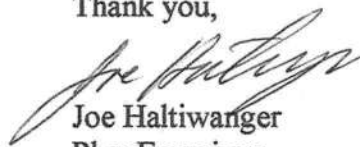
The meter location with type of service entrance (overhead or underground).

The location of the appliances and HVAC equipment.

Show all bedroom circuits to be Arc Fault Circuits (AFCI)

10. Please provide a Town of Fort White Zoning Compliance letter which permits the dwelling to be located in city limits of Fort White.

Thank you,



Joe Haltiwanger
Plan Examiner
Columbia County Building & Zoning
Department

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name:	MODEL 1539	Builder:	HARVEY BUILDERS
Address:		Permitting Office:	Columbia
City, State:	,	Permit Number:	23565
Owner:		Jurisdiction Number:	221000
Climate Zone:	North		

1. New construction or existing	New	12. Cooling systems	
2. Single family or multi-family	Single family	a. Central Unit	Cap: 30.0 kBtu/hr
3. Number of units, if multi-family	1		SEER: 10.00
4. Number of Bedrooms	3	b. N/A	
5. Is this a worst case?	Yes	c. N/A	
6. Conditioned floor area (ft ²)	1539 ft ²		
7. Glass area & type	Single Pane Double Pane	13. Heating systems	
a. Clear glass, default U-factor	0.0 ft ² 224.0 ft ²	a. Electric Heat Pump	Cap: 28.0 kBtu/hr
b. Default tint	0.0 ft ² 0.0 ft ²		HSPF: 7.00
c. Labeled U or SHGC	0.0 ft ² 0.0 ft ²	b. N/A	
8. Floor types		c. N/A	
a. Slab-On-Grade Edge Insulation	R=4.0, 196.0(p) ft	14. Hot water systems	
b. N/A		a. Electric Resistance	Cap: 40.0 gallons
c. N/A			EF: 0.88
9. Wall types		b. N/A	
a. Frame, Wood, Exterior	R=13.0, 1568.0 ft ²	c. Conservation credits	
b. Frame, Wood, Adjacent	R=13.0, 256.0 ft ²	(HR-Heat recovery, Solar	
c. N/A		DHP-Dedicated heat pump)	
d. N/A		15. HVAC credits	PT,
e. N/A		(CF-Ceiling fan, CV-Cross ventilation,	
10. Ceiling types		HF-Whole house fan,	
a. Under Attic	R=30.0, 1539.0 ft ²	PT-Programmable Thermostat,	
b. N/A		MZ-C-Multizone cooling,	
c. N/A		MZ-H-Multizone heating)	
11. Ducts			
a. Sup: Unc. Ret: Unc. AH: Garage	Sup. R=6.0, 110.0 ft		
b. N/A			

Glass/Floor Area: 0.15

Total as-built points: 25706

Total base points: 26079

PASS

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

PREPARED BY: SUNCOAST INSULATORS**DATE:** 6/3/5

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

OWNER/AGENT: _____**DATE:** _____

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

**BUILDING OFFICIAL:** _____**DATE:** _____

SUMMER CALCULATIONS
Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT									
GLASS TYPES .18 X Conditioned X BSPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt		Area X	SPM X	SOF = Points				
.18	1539.0	20.04	5551.5	Double, Clear	W	2.0	6.0	82.0	38.52	0.85	2683.2		
				Double, Clear	E	2.0	6.0	126.0	42.06	0.85	4494.5		
				Double, Clear	N	2.0	6.0	4.0	19.20	0.90	69.1		
				Double, Clear	S	2.0	6.0	12.0	35.87	0.78	334.0		
				As-Built Total:							224.0		7580.9
WALL TYPES Area X BSPM = Points				Type	R-Value		Area X	SPM	=	Points			
Adjacent	256.0	0.70	179.2	Frame, Wood, Exterior		13.0	1568.0	1.50			2352.0		
Exterior	1568.0	1.70	2665.6	Frame, Wood, Adjacent		13.0	256.0	0.60			153.6		
Base Total:				1824.0		2844.8		As-Built Total:				1824.0	2505.6
DOOR TYPES Area X BSPM = Points				Type			Area X	SPM	=	Points			
Adjacent	20.0	2.40	48.0	Exterior Insulated			40.0	4.10			164.0		
Exterior	40.0	6.10	244.0	Adjacent Insulated			20.0	1.60			32.0		
Base Total:				60.0		292.0		As-Built Total:				60.0	196.0
CEILING TYPES Area X BSPM = Points				Type	R-Value		Area X	SPM X	SCM =	Points			
Under Attic	1539.0	1.73	2662.5	Under Attic		30.0	1539.0	1.73 X 1.00		2662.5			
Base Total:				1539.0		2662.5		As-Built Total:				1539.0	2662.5
FLOOR TYPES Area X BSPM = Points				Type	R-Value		Area X	SPM	=	Points			
Slab	196.0(p)	-37.0	-7252.0	Slab-On-Grade Edge Insulation		4.0	196.0(p)	-36.70		-7193.2			
Raised	0.0	0.00	0.0										
Base Total:				-7252.0		As-Built Total:		196.0	-7193.2				
INFILTRATION Area X BSPM = Points				Area X SPM = Points									
1539.0 10.21 15713.2				1539.0 10.21 15713.2									

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT						
Summer Base Points: 19811.9				Summer As-Built Points: 21465.0						
Total Summer Points	X	System Multiplier	= Cooling Points	Total Component	X	Cap Ratio	X Duct Multiplier (DM x DSM x AHU)	X System Multiplier	X Credit Multiplier	= Cooling Points
19811.9		0.4266	8451.8	21465.0		1.000	(1.090 x 1.147 x 1.00)	0.341	0.950	8701.2
				21465.0		1.00	1.250	0.341	0.950	8701.2

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT								
GLASS TYPES												
.18 X Conditioned X BWPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt		Area X WPM X WOF = Points					
.18	1539.0	12.74	3529.2	Double, Clear	W	2.0	6.0	82.0	20.73	1.04	1772.3	
				Double, Clear	E	2.0	6.0	126.0	18.79	1.06	2511.3	
				Double, Clear	N	2.0	6.0	4.0	24.58	1.00	98.8	
				Double, Clear	S	2.0	6.0	12.0	13.30	1.26	200.8	
				As-Built Total:				224.0				4583.2
WALL TYPES Area X BWPM = Points				Type	R-Value		Area X WPM = Points					
Adjacent	256.0	3.60	921.6	Frame, Wood, Exterior	13.0		1568.0	3.40				5331.2
Exterior	1568.0	3.70	5801.6	Frame, Wood, Adjacent	13.0		256.0	3.30				844.8
Base Total:				As-Built Total:				1824.0				6176.0
DOOR TYPES Area X BWPM = Points				Type	Area X WPM = Points							
Adjacent	20.0	11.50	230.0	Exterior Insulated	40.0 8.40 336.0							
Exterior	40.0	12.30	492.0	Adjacent Insulated	20.0 8.00 160.0							
Base Total:				As-Built Total:		60.0 496.0						
CEILING TYPESArea X BWPM = Points				Type	R-Value		Area X WPM X WCM = Points					
Under Attic	1539.0	2.05	3154.9	Under Attic	30.0		1539.0	2.05 X 1.00				3154.9
Base Total:				As-Built Total:		1539.0 3154.9						
FLOOR TYPES Area X BWPM = Points				Type	R-Value		Area X WPM = Points					
Slab	196.0(p)	8.9	1744.4	Slab-On-Grade Edge Insulation	4.0		196.0(p)	8.45				1656.2
Raised	0.0	0.00	0.0									
Base Total:				As-Built Total:		196.0 1656.2						
INFILTRATION Area X BWPM = Points				Area X WPM = Points								
1539.0 -0.59 -908.0				1539.0 -0.59 -908.0								

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT						
Winter Base Points:		14965.8		Winter As-Built Points:		15158.3				
Total Winter Points	X	System Multiplier	= Heating Points	Total Component	X	Cap Ratio	X Duct Multiplier (DM x DSM x AHU)	X System Multiplier	X Credit Multiplier	= Heating Points
14965.8		0.6274	9389.5	15158.3		1.000	(1.069 x 1.169 x 1.00)	0.487	0.950	8766.5
				15158.3		1.00	1.250	0.487	0.950	8766.5

WATER HEATING & CODE COMPLIANCE STATUS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:
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BASE				AS-BUILT					
WATER HEATING									
Number of Bedrooms	X	Multiplier	= Total	Tank Volume	EF	Number of Bedrooms	X Tank Ratio	X Multiplier	X Credit = Total Multiplier
3		2746.00	8238.0	40.0	0.88	3	1.00	2746.00	1.00 8238.0
				As-Built Total:					8238.0

CODE COMPLIANCE STATUS									
BASE					AS-BUILT				
Cooling Points	+	Heating Points	+	Hot Water Points = Total Points	Cooling Points	+	Heating Points	+	Hot Water Points = Total Points
8452		9390		8238 26079	8701		8766		8238 25706

PASS



Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

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

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

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

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 82.5

The higher the score, the more efficient the home.

1. New construction or existing	New	12. Cooling systems	
2. Single family or multi-family	Single family	a. Central Unit	Cap: 30.0 kBtu/hr
3. Number of units, if multi-family	1		SEER: 10.00
4. Number of Bedrooms	3	b. N/A	
5. Is this a worst case?	Yes	c. N/A	
6. Conditioned floor area (ft²)	1539 ft²		
7. Glass area & type	Single Pane Double Pane	13. Heating systems	
a. Clear - single pane	0.0 ft² 224.0 ft²	a. Electric Heat Pump	Cap: 28.0 kBtu/hr
b. Clear - double pane	0.0 ft² 0.0 ft²		HSPF: 7.00
c. Tint/other SHGC - single pane	0.0 ft² 0.0 ft²	b. N/A	
d. Tint/other SHGC - double pane		c. N/A	
8. Floor types		14. Hot water systems	
a. Slab-On-Grade Edge Insulation	R=4.0, 196.0(p) ft	a. Electric Resistance	Cap: 40.0 gallons
b. N/A			EF: 0.88
c. N/A		b. N/A	
9. Wall types		c. Conservation credits	
a. Frame, Wood, Exterior	R=13.0, 1568.0 ft²	(HR-Heat recovery, Solar	
b. Frame, Wood, Adjacent	R=13.0, 256.0 ft²	DHP-Dedicated heat pump)	
c. N/A		15. HVAC credits	PT,
d. N/A		(CF-Ceiling fan, CV-Cross ventilation,	
e. N/A		HF-Whole house fan,	
10. Ceiling types		PT-Programmable Thermostat,	
a. Under Attic	R=30.0, 1539.0 ft²	MZ-C-Multizone cooling,	
b. N/A		MZ-H-Multizone heating)	
c. N/A			
11. Ducts			
a. Sup: Unc. Ret: Unc. AH: Garage	Sup. R=6.0, 110.0 ft		
b. N/A			

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

Builder Signature: _____ Date: _____

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



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

EnergyGauge® (Version: FLRCSB v3.30)

Town of Fort White

Post Office Box 129 Fort White, Florida 32038-0129
 Town Hall - (386) 497-2321 • Public Works - (386) 497-3345
 Email: townofftwhite@alltel.com • Web site: Townoffortwhitefl.com

CERTIFICATE OF COMPLIANCE & REQUEST FOR ISSUANCE OF BUILDING PERMIT

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

OWNER'S NAME: Rodney and Danay Harvey

ADDRESS: 125 SW Lanktree Glen Fort White, FL 32038

PROPERTY DESCRIPTION: 34-65-16-04059-241
 (parcel number if possible)
Lot # 1 Block C Hollingsworth Estates

DEVELOPMENT: Hollingsworth Estates

You are hereby authorized to issue the appropriate building permits.

8/16/05
 DATE

Janie S. Revelle
 LAND DEVELOPMENT REGULATION
 ADMINISTRATOR
 TOWN OF FORT WHITE

District #1
 Donald Cook
 497-1086

District #2
 Henry Maini
 497-2992

District #3
 John Gloskowski
 497-3999

District #4
 Demetric Jackson
 497-2078

Mayor
 Truett George
 497-4741

Town of Fort White

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

TOWN OF FORT WHITE APPLICATION FOR BUILDING PERMIT

PERMIT #: _____

\$25.00 FEE

DATE: 8-16-05

Applicant's Name: Dorsey + Rodney Harvey Phone: 352-745-2145

Address: PO Box 891 Newberry FL 32669

Owner's Name: Dorsey + Rodney Harvey Phone: 352-745-2145

Address: PO Box 891 Newberry FL 32669

Contractor's Name: Harvey Building + Construction - Gerald Harvey

Address: 25108 NW 68th Lane, High Springs, FL 32643

****Location of property 125 SW Lanktree Glen

Ft White, FL

****Type of development Single Family Res

Land use & zoning:

Minimum set-back: Street-front/side 30 rear 15 side 15

Legal Description (acres): ~ 5 acres

lot 1 block c Hollingsworth estates

I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction and that all the foregoing information is accurate and all work will be done in compliance with all laws regulating construction and zoning.

CRC058134

Contractor's License Number

Date 8-16-05

Janice Harvey
Applicant/Owner Contractor
Janice E. Revels
Approved by Janice E. Revels, Town Clerk RE

*****IF PROPERTY IS NOT OWNED BY APPLICANT, A STATEMENT FROM THE OWNER AUTHORIZING USE OF PROPERTY FOR THE TYPE OF DEVELOPMENT STATED ON THIS APPLICATION WILL BE REQUIRED.

Equal Opportunity Employer

Inst:2005021797 Date:09/07/2005 Time:12:25

mk DC, P. DeWitt Cason, Columbia County B:1057 P:1283

23565

NOTICE OF COMMENCEMENT

To Whom It May Concern:

The undersigned hereby informs you that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is stated in this NOTICE OF COMMENCEMENT.

Description of Property: LOT 1, BLOCK C, OF HOLLINGSWORTH ESTATES, A SUBDIVISION ACCORDING TO PLAT THEREOF RECORDED IN PLAT BOOK 5, PAGE 122, OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA.

General Description of Improvements: CONSTRUCTION

Owner and Address: RODNEY & DANAY HARVEY
P.O. BOX 891
NEWBERRY, FL 32669

Owner's Interest in Site of the Improvement: Fee Simple

Contractor and Address: HARVEY BUILDING & CONSTRUCTION, INC
25108 NW 68TH LANE
HIGH SPRINGS, FL 32643

Surety (if any): NA

Address: _____ Amount of Bond \$ _____

Name and address of person within the State of Florida designated by owner upon whom notices or other documents may be served:

In addition to himself, owner designated the following person to receive a copy of Lienor's Notice as provided in Section 713.06 (2) (b) Florida Statutes:

Name and Address: *Tri-County Bank*
P O Box 797
Trenton, FL 32693

Rodney Harvey
RODNEY HARVEY

Danay Harvey
DANAY HARVEY

State of Florida
County of Gilchrist

I hereby certify that on this day, before me, an officer duly authorized to administer oaths and to acknowledgements, personally appeared RODNEY AND DANAY HARVEY, known to me to be the person(s) described in and who executed the foregoing instrument, who acknowledged before me that they executed the same.

Witness my hand and official seal in the County and State aforesaid this 16 day of AUGUST, 2005..



Jonnette S. Boyd
MY COMMISSION # 00230532 EXPIRES
AUGUST 7, 2007
BONDED THROUGH PROFESSIONAL LIABILITY INS.

Jonnette S. Boyd
Notary Public

GERALD N. CALDWELL Jr.

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 4059-241

Building permit No. 000023565

Use Classification SFD, UTILITY

Fire: 59.20

Permit Holder GERALD HARVEY

Waste: _____

Owner of Building RODNEY & DANAY HARVEY

Total: 59.20

Location: 125 SW LANG TREE GLEN(HOLLINGSWORTH EST., LOT 1)

Date: 11/30/2005



John Pence

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

UNIVERSAL

ENGINEERING SCIENCES

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

REPORT ON IN-PLACE DENSITY TESTS

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

Columbia Co. Permit

CLIENT:

Harvey Building + Const

#000023565
23565

PROJECT:

Res Hollingsworth Estates

125 SW Lake Tree Glen

Fort White

AREA TESTED:

Fill + Prop. Bldg Pad + Found.

COURSE:

F/C

DEPTH OF TEST:

0 - 1

TYPE OF TEST:

ASTM-D-2922

DATE TESTED:

9-21-05

NOTE: The below tests ~~DO/DO NOT~~ meet the minimum of maximum density.

95 % compaction requirements

REMARKS:

23565

[illegible]

TECH.

S. L.

40,023 Notice of Treatment

Applicator: Florida Pest Control & Chemical Co. (www.flapest.com)

Address: 110 NW 116 Ave

City: Gaule Phone: 376-2661

Site Location: Subdivision _____

Lot # _____ Block# _____ Permit # 23565

Address: 125 SW Lake Tree Ft. White

Product used Active Ingredient % Concentration

☒ Dursban TC Chlorpyrifos 1 0.5%

☐ Terminor Fipronil 0.06%

☐ Bora-Care Disodium Octaborate Tetrahydrate 25.0%

Type treatment: ☒ Soil ☐ Wood

Area Treated	Square feet	Linear feet	Gallons Applied
<u>MB</u>	<u>2324</u>		<u>116</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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

If this notice is for the final exterior treatment, initial this line _____.

Date 9-21-05 12:00 Time Guy Print Technician's Name

Remarks: _____

Notice of Treatment

Applicator: Florida Pest Control & Chemical Co. (www.flapest.com)

Address: 116 NW 16th Ave

City: Grainville, FL Phone: 376-2661

Site Location: Subdivision Hollyhock

Lot # Block # Permit # 23565

Address 125 Centreway ft 16th

Product used	Active Ingredient	% Concentration
--------------	-------------------	-----------------

<input checked="" type="checkbox"/> Premise	Imidacloprid	0.1%
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<input type="checkbox"/> Termidor	Fipronil	0.12%
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<input type="checkbox"/> Bora-Care	Disodium Octaborate Tetrahydrate	23.0%
------------------------------------	----------------------------------	-------

Type treatment: ☒ Soil ☐ Wood

Area Treated	Square feet	Linear feet	Gallons Applied
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<u>Perimeter</u>	<u> </u>	<u>1406</u>	<u>28.12</u>
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<u> </u>	<u> </u>	<u>1164</u>	<u>16.44</u>
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<u> </u>	<u> </u>	<u>3700</u>	<u> </u>
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As per Florida Building Code 104.2.6 – If soil chemical barrier method for termite prevention is used, final exterior treatment shall be completed prior to final building approval.

If this notice is for the final exterior treatment, initial this line

Date <u>11.27.05</u>	Time <u>9:30</u>	Print Technician's Name <u>Richard Jesse</u>
----------------------	------------------	--

Remarks:

Applicator - White Permit File - Canary Permit Holder - Pink