

DATE 02/13/2013

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT

000030779

APPLICANT KIMMY EDGLEY PHONE 386.752.0580
ADDRESS 590 SW ARLINGTON BLVDD., STE. 113 LAKE CITY FL 32025
OWNER KENNETH & REBECCA DURHAM PHONE _____
ADDRESS 307 SW WAVERLY LN LAKE CITY FL 32025
CONTRACTOR DOUG EDGLEY PHONE 386.752.0580
LOCATION OF PROPERTY 90-W TO HUNTER,TL TO WAVERLY,TL AND THE SITE IS ON THE R

TYPE DEVELOPMENT SFD/UTILITY ESTIMATED COST OF CONSTRUCTION 148000.00
HEATED FLOOR AREA 1985.00 TOTAL AREA 2960.00 HEIGHT 22.00 STORIES 1
FOUNDATION CONC WALLS FRAMED ROOF PITCH 6'12 FLOOR CONC
LAND USE & ZONING A-3 MAX. HEIGHT _____
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 36-3S-16-00302-104 SUBDIVISION _____
LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 10.92

000001988 _____ CRC1330689 _____
Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor Kimmy Edgley
PWD 12-0071 BLK _____ TC _____ N _____
Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: 1 FOOT ABOVE ROAD.

Check # or Cash 4067

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

BUILDING PERMIT FEE \$ 740.00 CERTIFICATION FEE \$ 14.80 SURCHARGE FEE \$ 14.80
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 \$ 25.00 TOTAL FEE 869.60

INSPECTORS OFFICE _____ 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.

NOTICE: ALL OTHER APPLICABLE STATE OR FEDERAL PERMITS SHALL BE OBTAINED BEFORE COMMENCEMENT OF THIS PERMITTED DEVELOPMENT.

"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.

Notice of Treatment

Applicator: Florida Pest Control : (www.flapest.com)

Address: 536 SE BAYA

City LAKE CITY FL Phone 386 7521708

Site Location: Subdivision _____

Lot # _____ Block# _____ Permit # 30779

Address 3345 SE COUNTRY CLUB

Product used

Active Ingredient

% Concentration

☐ Premise Imidacloprid 0.1%

☒ Termidor Fipronil 0.12%

☐ _____

Type treatment:

☒ Soil



Area Treated

Square feet

Linear feet

Gallons Applied

DWELLING

3858

296

350

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 _____

7-10-13

Date

10:07

Time

DAVID FULLER

Print Technician's Name

Remarks: _____

Applicator - White

Permit File - Canary

Permit Holder - Pink

Columbia County Building Permit Application

Bullard, Jr - L.A.S.

CORRECT CONTRACTOR - Concrete Finish

For Office Use Only Application # 1302-17 Date Received 2/11 By TL Permit # 1980/30779

Zoning Official BLK Date 12 Feb 2013 Flood Zone X Land Use A-3 Zoning A-3

FEMA Map # N/A Elevation N/A MFE 1 above rd River N/A Plans Examiner T.C. Date 2-12-13

Comments _____

☒ NOC ☒ EH ☒ Deed or PA ☒ Site Plan ☐ State Road Info ☐ Well letter ☐ 911 Sheet ☐ Parent Parcel # _____

☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter

IMPACT FEES: EMS _____ Fire _____ Corr _____ ☒ Sub VF Form

Road/Code _____ School _____ = TOTAL (Suspended) ☐ Ellisville Water ☒ App Fee Paid

Septic Permit No. 13-0071Fax 386-752-4904Name Authorized Person Signing Permit Kimmy Edgley Phone 386-752-0580Address 590 SW ARLINGTON BLVD STE 113 LAKE CITY FL 32025Owners Name KENNETH & REBECCA DURHAM Phone 386-623-6654911 Address 307 SW WAVERLY LN LAKE CITY FL 32024Contractors Name DOUG EDGLEY - EDGLEY CONSTRUCTION Phone 386-623-6654Address 590 SW ARLINGTON BLVD STE 113 LAKE CITY FL 32025Fee Simple Owner Name & Address KENNETH & REBECCA DURHAMBonding Co. Name & Address N/AArchitect/Engineer Name & Address MARK DISOSWAY PE P.O. BOX 868 LAKE CITY FL 32056Mortgage Lenders Name & Address FFSB P.O. BOX 2029 LAKE CITY FL 32056Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress EnergyProperty ID Number 36-3S-15-00302- 104 KE Estimated Cost of Construction 188,000.00

Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____

Driving Directions 90 W TL ON HUNTER RD, TL ON WAVERLY PLACE SITE ON RIGHTNumber of Existing Dwellings on Property N/AConstruction of RESIDENTIAL HOME Total Acreage 10.92 Lot Size _____Do you need a Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 22'Actual Distance of Structure from Property Lines - Front 227' Side 568' Side 230' Rear 250'Number of Stories 1 Heated Floor Area 1985 Total Floor Area 2960 Roof Pitch 6/12

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. CODE: Florida Building Code 2010 and the 2008 National Electrical Code.

Spoken Doug . . . 2-12-13

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. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

(Owners Must Sign All Applications Before Permit Issuance.)



Owners Signature

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

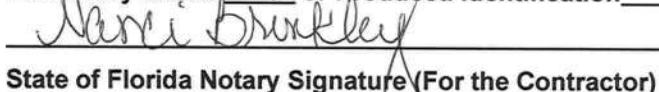
CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.


Contractor's Signature (Permitee)

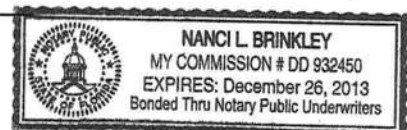
Contractor's License Number CRC1330689
Columbia County
Competency Card Number 44

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 11th day of February 2013.

Personally known ☒ or Produced Identification ☐


State of Florida Notary Signature (For the Contractor)

SEAL:



Atten: Connie
**Columbia County Building Department
Culvert Permit**

**Culvert Permit No.
000001988**

30779

DATE 02/13/2013 PARCEL ID # 36-3S-16-00302-104
APPLICANT KIMMY EDGLEY PHONE 386.752.0580
ADDRESS 590 SW ARLINGTON BLVD, STE. 113 LAKE CITY FL 32025
OWNER KENNETH & REBECCA DURHAM PHONE 386.623.0281
ADDRESS 307 SW WAVERLY LN LAKE CITY FL 32024
CONTRACTOR DOUG EDGLEY PHONE 386.752.0580
LOCATION OF PROPERTY 90-W TO HUNTER, TL TO WAVERLY, TL AND THE JOB SITE IS ON THE R.

SUBDIVISION/LOT/BLOCK/PHASE/UNIT _____

INSTALLATION INFORMATION

SIGNATURE *Kimmy Edgley*

- (A) A culvert shall be required to be installed as part of any newly constructed private driveway or road, or public road, which connects to a county road in Columbia County. Culvert installation for residential use shall require a permit issued by the Building and Zoning Department. Prior to any culvert permit being issued, an inspection by the Public Works Department shall be required to determine the proper size, length, and location for installation. Culvert installation for commercial, industrial, and other uses shall conform to the approved site plan or to the specifications of a registered engineer. Joint use culverts will comply with Florida Department of Transportation specifications.
- (B) The culvert shall comply and be installed in accordance with Columbia County Land Development Regulation, Access Control: Section 4.2.3 standards. Proper installation of the culvert shall be verified by a final inspection performed by the Public Works Department.
- (C) All culverts required by this policy shall be installed prior to the Building Department granting permission to connect permanent electrical service to the facility or facilities being serviced by newly constructed private driveway or road. In cases where no electrical service exists, installation shall be completed prior to final inspection approval.
- (D) Mitered-end culverts shall be used in the following applications:
(1) When the culvert is to be placed giving access to a paved street.; (2) When the road is contained within a subdivision (recorded or unrecorded) that has not reached a "build out" of fifty percent (50%) or more.; (3) In all new subdivisions for residential use. New subdivisions shall be required as part of the final plat to specify culvert diameter and length.; (4) When the predominant use already established by the use of mitered-end culverts period.

☐

Culvert installation shall conform to the approved site plan standards.

☐

Department of Transportation Permit installation approved standards.

☒

Shall conform to Public Works Determinations as Stated Below:

18" x 32' no mitres

P W Inspectors Name: *James Durrance* Date: *2-18-13*

Final Inspection Date:

2-18-13

P W Inspectors Name:

James Durrance

Signature:

James Durrance

CONTACT FOR REQUIREMENTS AND INSPECTIONS:

PUBLIC WORKS DEPARTMENT

Phone: 386-758-1019

Amount Paid 25.00

Check No. 4067

All Proper Safety Requirements Should Be Followed During The Installation Of The Culvert

Atten: Connie
Columbia County Building Department
Culvert Permit

Culvert Permit No.
000001988

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P W Inspectors Name: James Durrance Date: 2-18-13

Final Inspection Date:

2-18-13

P W Inspectors Name:

James Durrance

Signature:

James Durrance

CONTACT FOR REQUIREMENTS AND INSPECTIONS:

PUBLIC WORKS DEPARTMENT

Phone: 386-758-1019

Amount Paid 25.00

Check No. 4067

All Proper Safety Requirements Should Be Followed During The Installation Of The Culvert

Permit 30779

ATT #5509

This Instrument Prepared By:
Abstract Trust Title LLC
PO Box 7175
Lake City, Florida 32055

NOTICE OF COMMENCEMENT

TO WHOM IT MAY CONCERN:

The undersigned hereby give notice that improvements will be made to certain real property and in accordance with Chapter 713, Florida Statutes, the following is provided in this Notice of Commencement:

1. Description of Property: See Exhibit "A" attached hereto and by this reference made a part thereof.
2. General Description of Improvement: Construction of Dwelling
3. Owner information:

a. Name and Address: Kenneth R. Durham, Jr. and his wife, Rebecca L. Durham
226 Martha Street, Live Oak, FL 32060

b. Interest in property: fee simple

c. Name and address of fee simple title holder (if other than Owner): NONE

4. Contractor (name and address): Edgley Construction Company
590 SW Arlington Blvd., Lake City, FL 32025

5. Surety:

a. Name and Address: N/A

b. Amount of bond: N/A

6. LENDER: First Federal Bank of Florida
4705 West US Highway 90
PO Box 2029
Lake City, FL 32056

7. Persons within the State of Florida designated by Owner upon whom notices of other documents may be served as provided in Section 713.13(1)(a)2, Florida Statutes: NONE

8. In addition to himself, Owner designates PAULA HACKER, of FIRST FEDERAL BANK OF FLORIDA at 4705 WEST US HIGHWAY 90 / PO BOX 2029, LAKE CITY, FL 32056, to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b) Florida Statutes.

9. Expiration date of Notice of Commencement (the expiration date is 1 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 1 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 NEED TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

*Owner is used for singular or plural as context requires.

Signed, sealed and delivered in the presence:

Susan McClamma
WITNESS
Susan McClamma
WITNESS

Kenneth R. Durham, Jr.
Kenneth R. Durham, Jr.
Rebecca L. Durham
Rebecca L. Durham

STATE OF FLORIDA
COUNTY OF SUWANNEE

Before me, personally appeared Kenneth R. Durham, Jr. and his wife, Rebecca L. Durham to me known to be the person(s) described in and who executed the foregoing instrument, and they acknowledged to and before me that they executed said instrument for the purpose therein expressed.

Witness my hand and official seal this 8th day of February, 2013.

(SEAL)



Susan McClamma
NOTARY PUBLIC

My Commission Expires:

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.

Kenneth R. Durham, Jr.
Kenneth R. Durham, Jr.

Rebecca L. Durham
Rebecca L. Durham

ATT#: 5509

EXHIBIT "A"

Commence at the Northeast corner of the South $\frac{1}{4}$ of the Northeast $\frac{1}{4}$ of Section 36, Township 3 South, Range 15 East, Columbia County, Florida, and run South $00^{\circ}17'12''$ West along the East line of the Northeast $\frac{1}{4}$ of Section 36 a distance of 773.59 feet; thence South $89^{\circ}55'52''$ West, a distance of 857.97 feet to the Point of Beginning; thence South $00^{\circ}04'08''$ East a distance of 534.67 feet to a point on the Northerly maintained right-of-way line of SW Waverly Lane; thence continue South $00^{\circ}04'08''$ East a distance of 21.33 feet to the South line of the Northeast $\frac{1}{4}$ of Section 36; thence South $89^{\circ}55'52''$ West along said South line of the Northeast $\frac{1}{4}$ of Section 36, a distance of 855.78 feet; thence North $00^{\circ}04'08''$ West, a distance of 10.84 feet to a point on the Northerly maintained right-of-way line of SW Waverly Lane; thence continue North $00^{\circ}04'08''$ West, a distance of 545.16 feet; thence North $89^{\circ}55'52''$ East, a distance of 855.78 feet to the Point of Beginning.

Subject to: That part within the maintained right-of-way of SW Waverly Lane across the South side thereof.

KD
RD



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

By: Donnie Don
Deputy Clerk

Date: 2/12/13

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1302-17CONTRACTOR EDGLEY CONSTRUCTIONPHONE 386-752-0580

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.

<input checked="" type="checkbox"/> ELECTRICAL <u>37</u>	Print Name <u>DONALD HOLLINGSWORTH</u> License #: <u>13012377</u>	Signature <u>[Signature]</u> Phone #: <u>386-755-5944</u>
<input checked="" type="checkbox"/> MECHANICAL/A/C <u>BB</u>	Print Name <u>LAMAR BOOZER</u> License #: <u>RA0035027</u>	Signature <u>[Signature]</u> Phone #: <u>386-752-6700</u>
<input checked="" type="checkbox"/> PLUMBING/GAS	Print Name _____ License #: <u>-200-18-</u>	Signature _____ Phone #: _____
<input checked="" type="checkbox"/> ROOFING <u>534</u>	Print Name <u>DARIN L SUMMERLIN</u> License #: <u>CCC1326192</u>	Signature <u>[Signature]</u> Phone #: <u>386-288-5426</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
<input checked="" type="checkbox"/> MASON	<u>000620</u>	BRANT STEVENS	<u>[Signature]</u>
<input checked="" type="checkbox"/> CONCRETE FINISHER	<u>1349</u>	GREGORY SCOTT REEVES	<u>[Signature]</u>
<input checked="" type="checkbox"/> FRAMING <u>602</u>	<u>CRC022354</u>	WILLIAM GUERNSEY	<u>[Signature]</u>
<input checked="" type="checkbox"/> INSULATION	<u>000240</u>	WILLIAM SIKES	<u>[Signature]</u>
STUCCO	<u>N/A</u>		
<input checked="" type="checkbox"/> DRYWALL	<u>001177</u>	JOSEPH AMBROS	<u>[Signature]</u>
PLASTER	<u>N/A</u>		
<input checked="" type="checkbox"/> CABINET INSTALLER	<u>000103</u>	JOHN D JENKINS	<u>[Signature]</u>
<input checked="" type="checkbox"/> PAINTING	<u>000632</u>	JOHN M BISPHAM	<u>[Signature]</u>
ACOUSTICAL CEILING	<u>-</u>		
<input checked="" type="checkbox"/> GLASS	<u>000618</u>	CARL BULLARD JR	<u>[Signature]</u>
<input checked="" type="checkbox"/> CERAMIC TILE	<u>000214</u>	JAMES L RIX JR	<u>[Signature]</u>
<input checked="" type="checkbox"/> FLOOR COVERING	<u>000546</u>	RYAN HARDING	<u>[Signature]</u>
<input checked="" type="checkbox"/> ALUM/VINYL SIDING	<u>001214</u>	JONATHAN NORRIS	<u>[Signature]</u>
<input checked="" type="checkbox"/> GARAGE DOOR	<u>000619</u>	CARL BULLARD JR	<u>[Signature]</u>
METAL BLDG ERECTOR	<u>-</u>		

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.

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1302-17

CONTRACTOR

Edgley Construction

PHONE

752-0580

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

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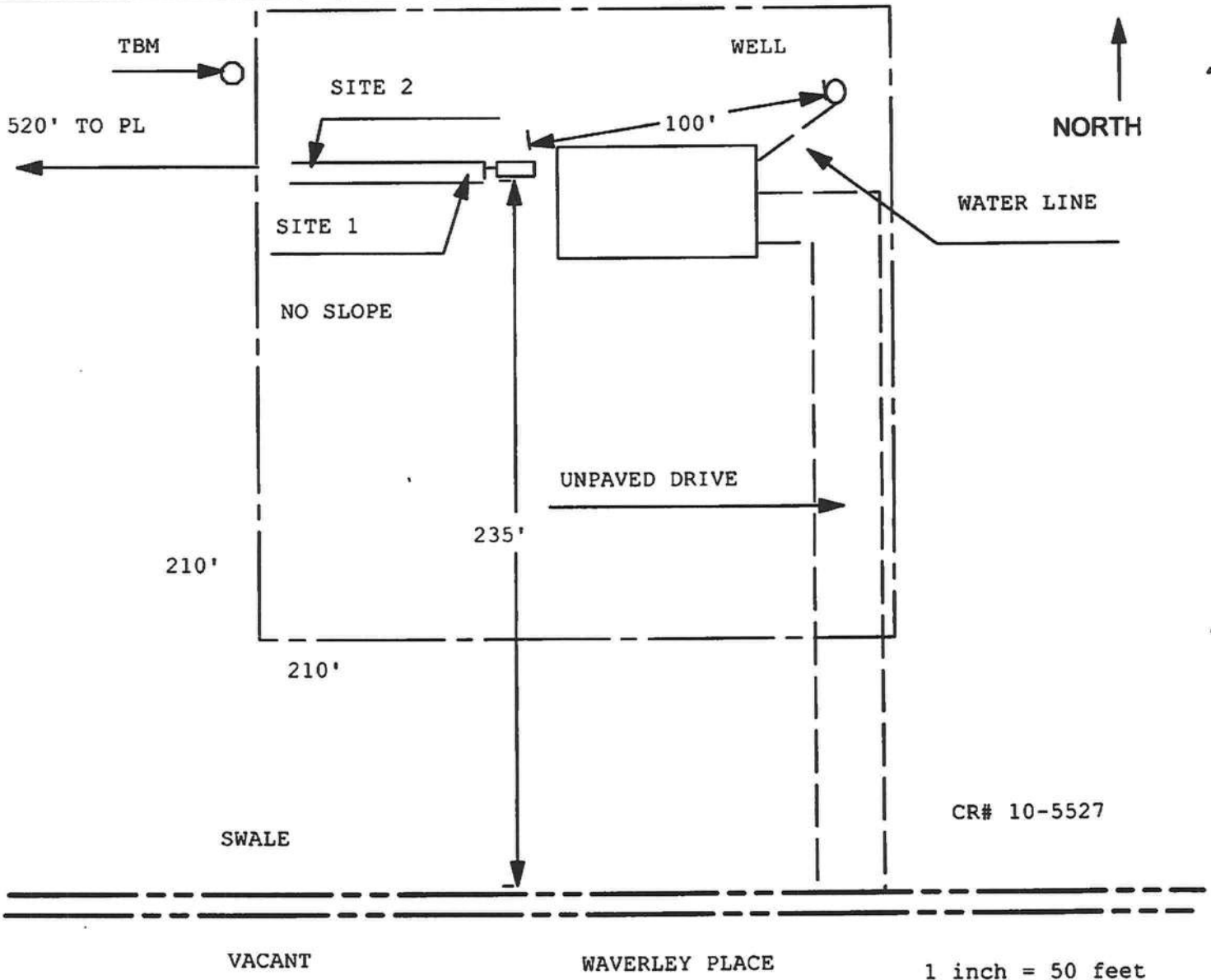
ELECTRICAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS <u>298</u>	Print Name <u>Dow 13:115 SR</u> License #: <u>RF 11067418</u>	Signature <u>Dow</u> Phone #: <u>386-754-6140</u>
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
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.

**Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan**
Permit Application Number: 13-0071

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Paul Rapp Date 10/10/12
Plan Approved X Not Approved Date 2-11-13
By Jillie Ford Env Health Director Columbia CPHU
Notes: Kenneth & Rebecca Durham

Prepared by:
Abstract Trust Title, LLC
PO Box 7175
Lake City, FL 32055

Post: 201212018645 Date: 12/20/2012 Time: 8:40 AM
Doc Stamp-Deed: 215.60
DC, P. DeWitt Cason, Columbia County Page 1 of 2 B: 1246 P: 1313

ATS# 4-5352

Warranty Deed

Individual to Individual

THIS WARRANTY DEED made the 15 day of December, 2012, Faye R. Duffe, A Single Person, hereinafter called the grantor, to Kenneth R. Durham, Jr. and his wife, Rebecca L. Durham whose post office address is: 13715 78th Street, Live Oak, FL 32060 hereinafter called the grantee:

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporation)

Witnesseth: That the grantor, for and in consideration of the sum of \$10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys, and confirms unto the grantee, all that certain land situate in COLUMBIA County, Florida, viz: Parcel ID# R00302-000

See Exhibit "A" attached hereto and by this reference made a part hereof.

TOGETHER with all tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

TO HAVE AND TO HOLD, the same in fee simple forever.

AND the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2012.

IN WITNESS WHEREOF, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

Jennifer Fife
Witness:

Jennifer Fife
Printed Name:

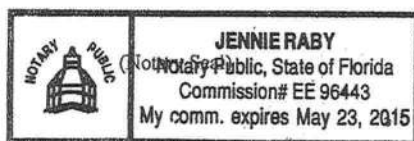
Christina Schmitt
Witness:

Christina T. Schmitt
Printed Name:

FAYE R. DUFFE BY L. Darryl Duffe
Faye R. Duffe, by her Attorney In Fact, L. Darryl Duffe

STATE OF Florida
COUNTY OF Nassau

The foregoing instrument was acknowledged before me this 15th day of December, 2012 by L. DARRYL DUFFE, ATTORNEY IN FACT FOR FAYE R. DUFFE, A SINGLE PERSON personally known to me or, if not personally known to me, who produced FLID for identification and who did not take an oath.



Jennie Raby
Notary Public

My Commission Expires: _____

ATT#: 5352

EXHIBIT "A"

Commence at the Northeast corner of the South $\frac{1}{2}$ of the Northeast $\frac{1}{4}$ of Section 36, Township 3 South, Range 15 East, Columbia County, Florida, and run South $00^{\circ}17'12''$ West along the East line of the Northeast $\frac{1}{4}$ of Section 36 a distance of 773.59 feet; thence South $89^{\circ}55'52''$ West, a distance of 857.97 feet to the Point of Beginning; thence South $00^{\circ}04'08''$ East a distance of 534.67 feet to a point on the Northerly maintained right-of-way line of SW Waverly Lane; thence continue South $00^{\circ}04'08''$ East a distance of 21.33 feet to the South line of the Northeast $\frac{1}{4}$ of Section 36; thence South $89^{\circ}55'52''$ West along said South line of the Northeast $\frac{1}{4}$ of Section 36, a distance of 855.78 feet; thence North $00^{\circ}04'08''$ West, a distance of 10.84 feet to a point on the Northerly maintained right-of-way line of SW Waverly Lane; thence continue North $00^{\circ}04'08''$ West, a distance of 545.16 feet; thence North $89^{\circ}55'52''$ East, a distance of 855.78 feet to the Point of Beginning.

Subject to: That part within the maintained right-of-way of SW Waverly Lane across the South side thereof.

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787
PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for assigning and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Service Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County.

DATE REQUESTED: 10/15/2012 DATE ISSUED: 10/31/2012

ENHANCED 9-1-1 ADDRESS:

307 SW WAVERLY LN

LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

36-3S-15-00302-000

Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCEL. PARENT
PARCEL NUMBER.

Address Issued By: SIGNED: / RONAL N. CROFT
Columbia County 9-1-1 Addressing / GIS Department

**NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION
INFORMATION RECEIVED FROM THE REQUESTER. SHOULD,
AT A LATER DATE, THE LOCATION INFORMATION BE FOUND
TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.**

Columbia County Property Appraiser

CAMA updated: 2/1/2013

2012 Tax Year

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

Parcel: 36-3S-15-00302-104

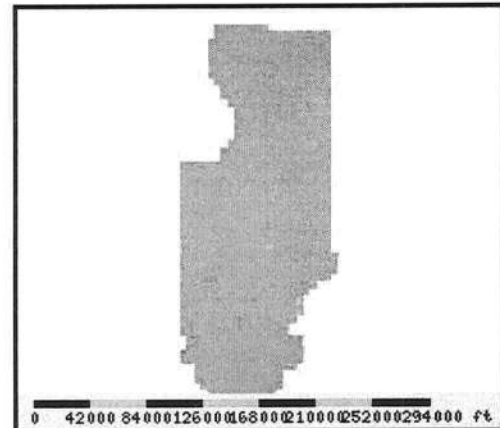
<< Next Lower Parcel

Next Higher Parcel >>

Owner & Property Info

Search Result: 1 of 1

Owner's Name	DURHAM KENNETH R & REBECCA L		
Mailing Address	13715 78TH STREET LIVE OAK, FL 32060		
Site Address	100 SW WAVERLY LN		
Use Desc. (code)	NO AG ACRE (009900)		
Tax District	3 (County)	Neighborhood	36315
Land Area	10.920 ACRES	Market Area	01
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. (AKA PRL "D" DUFFE S/D UNR): COMM NE COR OF S1/2 OF NE1/4, RUN S 773.59 FT, W 857.97 FT FOR POB, RUN S 534.67 FT TO A PT ON N'RLY MAINT R/W LINE OF SW WAVERLY LN, RUN S 21.33 FT TO S LINE OF NE1/4, RUN W 855.78 FT, N 10.84 FT TO PT ON N LINE OF N'RLY MAINT R/W LINE SW WAVERLY LN, CONT N 545.16 FT, E 855.78 FT TO POB. WD 1246-1313		

**Property & Assessment Values****2012 Certified Values**

There are no 2012 Certified Values for this parcel

2013 Working Values**NOTE:**

2013 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
12/15/2012	1246/1313	WD	V	Q	01	\$30,800.00

Building Characteristics

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

Extra Features & Out Buildings

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

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
009900	AC NON-AG (MKT)	10.92 AC	1.00/1.00/1.00/1.00	\$2,125.76	\$23,213.00

Columbia County Property Appraiser

CAMA updated: 2/1/2013



*Hall's Pump & Well Service, Inc.
904 NW Main Blvd
Lake City, FL. 32055*

Date: 2-11-13

Notice to All Contractors:

Attn: EDGLEY CONSTRUCTION - DOUG EDGLEY

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. All wells will have a pump & tank combination that will be sufficient enough for each situation.

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

Thank You,

A handwritten signature in cursive script that reads "Russell Davis".

Russell Davis

PRODUCT APPROVAL SPECIFICATION SHEET

Location: _____

Project Name: DURHAM

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	MASONITE	EXTERIOR DOORS	FL 4904.1
2. Sliding			
3. Sectional			
4. Roll up			
5. Automatic			
6. Other			
B. WINDOWS			
1. Single hung	ATRIUM	WINDOWS S/H	FL 11626.1
2. Horizontal Slider	ATRIUM	WINDOWS H/S	FL 11624
3. Casement			
4. Double Hung	ATRIUM	WINDOWS FIXED	FL 11623
5. Fixed			
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11 Dual Action			
12. Other			
C. PANEL WALL			
1. Siding	CERTAINTEED	FIBER CEMENT SIDING	FL 3148.1
2. Soffits	KAYLAN	ALUMINUM SOFFIT	FL 12198.1
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	CERTAINEED	SHINGLES	FL 5444
2. Underlayments	WOODLAND IND	30 # FELT	FL 1814.1
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	GAF		FL 4911-R1
11. Wood shingles /shakes			
12. Roofing Slate			



Category/Subcategory (cont.)	Manufacturer	Product Description	Approval Number(s)
13. Liquid Applied Roof Sys			
14. Cements-Adhesives – Coatings			
15. Roof Tile Adhesive			
16. Spray Applied Polyurethane Roof			
17. Other			
E. SHUTTERS			
1. Accordion			
2. Bahama			
3. Storm Panels			
4. Colonial			
5. Roll-up			
6. Equipment			
7. Others			
F. SKYLIGHTS			
1. Skylight			
2. Other			
G. STRUCTURAL COMPONENTS			
1. Wood connector/anchor	SIMPSON	CONNECTORS	FL 9589 R1
2. Truss plates			
3. Engineered lumber	I LEVEL	LVL, ENG LUMBER	FL 1630.1
4. Railing			
5. Coolers-freezers			
6. Concrete Admixtures			
7. Material			
8. Insulation Forms			
9. Plastics			
10. Deck-Roof			
11. Wall			
12. Sheds			
13. Other			
H. NEW EXTERIOR ENVELOPE PRODUCTS			
1.			
2.			

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) the performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.

I understand these products may have to be removed if approval cannot be demonstrated during inspection.

Douglas E. Edley
 Contractor or Contractor's Authorized Agent Signature

Douglas E. Edley 2-11-13
 Print Name Date

Permit # (FOR STAFF USE ONLY)

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Business and Professional Regulation - Residential Performance Method

Project Name: 1208001a
 Street: 13715 78th St.
 City, State, Zip: Live Oak, FL,
 Owner: Durham
 Design Location: FL, Gainesville

Builder Name: Doug Edgely
 Permit Office: Columbia
 Permit Number: 30779
 Jurisdiction: 221000

1. New construction or existing	New (From Plans)
2. Single family or multiple family	Single-family
3. Number of units, if multiple family	1
4. Number of Bedrooms	3
5. Is this a worst case?	Yes
6. Conditioned floor area above grade (ft ²)	1985
Conditioned floor area below grade (ft ²)	0
7. Windows (207.3 sqft.)	Description Area
a. U-Factor:	Dbl, U=0.35 207.33 ft ²
SHGC:	SHGC=0.35
b. U-Factor:	N/A ft ²
SHGC:	
c. U-Factor:	N/A ft ²
SHGC:	
d. U-Factor:	N/A ft ²
SHGC:	
Area Weighted Average Overhang Depth:	2.513 ft.
Area Weighted Average SHGC:	0.350
8. Floor Types (1985.0 sqft.)	Insulation Area
a. Slab-On-Grade Edge Insulation	R=0.0 1985.00 ft ²
b. N/A	R= ft ²
c. N/A	R= ft ²

9. Wall Types (1732.5 sqft.)	Insulation Area
a. Frame - Wood, Exterior	R=13.0 1516.50 ft ²
b. Frame - Wood, Adjacent	R=13.0 216.00 ft ²
c. N/A	R= ft ²
d. N/A	R= ft ²
10. Ceiling Types (2031.0 sqft.)	Insulation Area
a. Under Attic (Vented)	R=30.0 2031.00 ft ²
b. N/A	R= ft ²
c. N/A	R= ft ²
11. Ducts	R ft ²
a. Sup: Attic, Ret: Attic, AH: Main	6 397
12. Cooling systems	kBtu/hr Efficiency
a. Central Unit	45.0 SEER:13.00
13. Heating systems	kBtu/hr Efficiency
a. Electric Heat Pump	45.0 HSPF:7.70
14. Hot water systems	
a. Electric	Cap: 40 gallons
	EF: 0.920
b. Conservation features	
None	
15. Credits	Pstat

Glass/Floor Area: 0.104

Total Proposed Modified Loads: 33.64

Total Standard Reference Loads: 42.05

PASS

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

PREPARED BY: EVAN BEHNSLEY
 DATE: 1/24/13

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: _____

- Compliance requires completion of a Florida Air Barrier and Insulation Inspection Checklist

PROJECT											
Title:	1208001a	Bedrooms:	3	Address Type:	Street Address						
Building Type:	User	Conditioned Area:	1985	Lot #							
Owner:	Durham	Total Stories:	1	Block/SubDivision:							
# of Units:	1	Worst Case:	Yes	PlatBook:							
Builder Name:	Doug Edgely	Rotate Angle:	90	Street:	13715 78th St.						
Permit Office:		Cross Ventilation:		County:	Suwannee						
Jurisdiction:		Whole House Fan:		City, State, Zip:	Live Oak , FL ,						
Family Type:	Single-family										
New/Existing:	New (From Plans)										
Comment:											

CLIMATE										
✓	Design Location	TMY Site	IECC Zone	Design Temp 97.5 %	2.5 %	Int Design Temp Winter	Summer	Heating Degree Days	Design Moisture	Daily Temp Range
_____	FL, Gainesville	FL_GAINESVILLE_REGI	2	32	92	70	75	1305.5	51	Medium

BLOCKS			
Number	Name	Area	Volume
1	Block1	1985	17865

SPACES										
Number	Name	Area	Volume	Kitchen	Occupants	Bedrooms	Infil ID	Finished	Cooled	Heated
1	Main	1985	17865	Yes	6	3	1	Yes	Yes	Yes

FLOORS										
✓	#	Floor Type	Space	Perimeter	R-Value	Area		Tile	Wood	Carpet
_____	1	Slab-On-Grade Edge Insulatio	Main	192.5 ft	0	1985 ft²	----	0.3	0.3	0.4

ROOF												
✓	#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	SA Tested	Emitt	Emitt Tested	Deck Insul.	Pitch (deg)
_____	1	Hip	Composition shingles	2220 ft²	0 ft²	Dark	0.96	No	0.9	No	0	26.6

ATTIC							
✓	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
_____	1	Full attic	Vented	300	1985 ft²	N	N

CEILING							
✓	#	Ceiling Type	Space	R-Value	Area	Framing Frac	Truss Type
_____	1	Under Attic (Vented)	Main	30	2031 ft²	0.11	Wood

WALLS

✓ #	Ornt	Adjacent To	Wall Type	Space	Cavity R-Value	Width Ft	In	Height Ft	In	Area	Sheathing R-Value	Framing Fraction	Solar Absor	Below Grade%
1	N=>E	Exterior	Frame - Wood	Main	13	52	4	9		471 ft²		0.23	0.75	0
2	E=>S	Exterior	Frame - Wood	Main	13	36	10	9		331.5 ft²		0.23	0.75	0
3	S=>W	Exterior	Frame - Wood	Main	13	33	4	9		300 ft²		0.23	0.75	0
4	W=>N	Exterior	Frame - Wood	Main	13	39	0	9		351 ft²		0.23	0.75	0
5	NW=>NE	Exterior	Frame - Wood	Main	13	7		9		63 ft²		0.23	0.75	0
6	S=>W	Garage	Frame - Wood	Main	13	24		9		216 ft²		0.23	0.75	0

DOORS

✓ #	Ornt	Door Type	Space	Storms	U-Value	Width Ft	In	Height Ft	In	Area
1	NW=>NE	Insulated	Main	None	0.400000	2		6	8	13.33333
2	S=>W	Insulated	Main	None	0.400000	2		6	8	20 ft²
3	S=>W	Insulated	Main	None	0.400000	2		6	8	20 ft²

WINDOWS

Orientation shown is the entered orientation (=>) changed to Worst Case.

✓ #	Ornt	Wall ID	Frame	Panes	NFRC	U-Factor	SHGC	Area	Overhang Depth	Separation	Int Shade	Screening
1	N=>E	1	Metal	Low-E Double	Yes	0.35	0.35	20 ft²	1 ft 6 in	1 ft 0 in	None	None
2	N=>E	1	Metal	Low-E Double	Yes	0.35	0.35	90 ft²	1 ft 6 in	1 ft 0 in	None	None
3	NW=>NE	5	Metal	Low-E Double	Yes	0.35	0.35	20 ft²	12 ft 0 in	1 ft 0 in	None	None
4	S=>W	3	Metal	Low-E Double	Yes	0.35	0.35	30 ft²	1 ft 6 in	1 ft 0 in	None	None
5	S=>W	3	Metal	Low-E Double	Yes	0.35	0.35	13.33333	1 ft 6 in	1 ft 0 in	None	None
6	S=>W	3	Metal	Low-E Double	Yes	0.35	0.35	30 ft²	1 ft 6 in	1 ft 0 in	None	None
7	W=>N	4	Metal	Low-E Double	Yes	0.35	0.35	4 ft²	1 ft 6 in	1 ft 0 in	None	None

GARAGE

✓ #	Floor Area	Ceiling Area	Exposed Wall Perimeter	Avg. Wall Height	Exposed Wall Insulation
1	580.00008 ft²	580.00008 ft²	72 ft	9 ft	1

INFILTRATION

#	Scope	Method	SLA	CFM 50	ELA	EqLA	ACH	ACH 50
1	Wholehouse	Best Guess	0.000699	3644.6	200.08	376.29	0.5389	12.240

HEATING SYSTEM

✓ #	System Type	Subtype	Efficiency	Capacity	Block	Ducts
1	Electric Heat Pump	None	HSPF: 7.7	45 kBtu/hr	1	sys#1

COOLING SYSTEM

✓	#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Block	Ducts
_____	1	Central Unit	None	SEER: 13	45 kBtu/hr	1350 cfm	0.75	1	sys#1

HOT WATER SYSTEM

✓	#	System Type	SubType	Location	EF	Cap	Use	SetPnt	Conservation
_____	1	Electric	None	Garage	0.92	40 gal	60 gal	120 deg	None

SOLAR HOT WATER SYSTEM

✓	FSEC Cert #	Company Name	System Model #	Collector Model #	Collector Area	Storage Volume	FEF
_____	None	None			ft²		

DUCTS

✓	#	--- Supply --- Location	R-Value	Area	--- Return --- Location	Area	Leakage Type	Air Handler	CFM 25	Percent Leakage	QN	RLF	HVAC # Heat	Cool
_____	1	Attic	6	397 ft²	Attic	99.25 ft	Default Leakage	Main	(Default)	(Default) %			1	1

TEMPERATURES

Programable Thermostat: Y

Ceiling Fans:

Cooling	<input checked="" type="checkbox"/>	Jan	<input checked="" type="checkbox"/>	Feb	<input checked="" type="checkbox"/>	Mar	<input type="checkbox"/>	Apr	<input type="checkbox"/>	May	<input checked="" type="checkbox"/>	Jun	<input checked="" type="checkbox"/>	Jul	<input checked="" type="checkbox"/>	Aug	<input checked="" type="checkbox"/>	Sep	<input type="checkbox"/>	Oct	<input type="checkbox"/>	Nov	<input checked="" type="checkbox"/>	Dec
Heating	<input checked="" type="checkbox"/>	Jan	<input checked="" type="checkbox"/>	Feb	<input checked="" type="checkbox"/>	Mar	<input type="checkbox"/>	Apr	<input type="checkbox"/>	May	<input type="checkbox"/>	Jun	<input type="checkbox"/>	Jul	<input type="checkbox"/>	Aug	<input type="checkbox"/>	Sep	<input type="checkbox"/>	Oct	<input checked="" type="checkbox"/>	Nov	<input checked="" type="checkbox"/>	Dec
Venting	<input checked="" type="checkbox"/>	Jan	<input checked="" type="checkbox"/>	Feb	<input checked="" type="checkbox"/>	Mar	<input type="checkbox"/>	Apr	<input type="checkbox"/>	May	<input type="checkbox"/>	Jun	<input type="checkbox"/>	Jul	<input type="checkbox"/>	Aug	<input type="checkbox"/>	Sep	<input type="checkbox"/>	Oct	<input checked="" type="checkbox"/>	Nov	<input checked="" type="checkbox"/>	Dec

Thermostat Schedule: HERS 2006 Reference

Schedule Type		1	2	3	4	5	6	7	8	9	10	11	12
Cooling (WD)	AM	78	78	78	78	78	78	78	78	80	80	80	80
	PM	80	80	78	78	78	78	78	78	78	78	78	78
Cooling (WEH)	AM	78	78	78	78	78	78	78	78	78	78	78	78
	PM	78	78	78	78	78	78	78	78	78	78	78	78
Heating (WD)	AM	66	66	66	66	66	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	68	68
Heating (WEH)	AM	66	66	66	66	66	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	68	68

Florida Code Compliance Checklist

Florida Department of Business and Professional Regulations
Residential Whole Building Performance Method

ADDRESS: 13715 78th St.
Live Oak, FL,

PERMIT #:

MANDATORY REQUIREMENTS SUMMARY - See individual code sections for full details.

COMPONENT	SECTION	SUMMARY OF REQUIREMENT(S)	CHECK
Air leakage	402.4	To be caulked, gasketed, weatherstripped or otherwise sealed. Recessed lighting IC-rated as meeting ASTM E 283. Windows and doors = 0.30 cfm/sq.ft. Testing or visual inspection required. Fireplaces: gasketed doors & outdoor combustion air. Must complete envelope leakage report or visually verify Table 402.4.2.	
Thermostat & controls	403.1	At least one thermostat shall be provided for each separate heating and cooling system. Where forced-air furnace is primary system, programmable thermostat is required. Heat pumps with supplemental electric heat must prevent supplemental heat when compressor can meet the load.	
Ducts	403.2.2	All ducts, air handlers, filter boxes and building cavities which form the primary air containment passageways for air distribution systems shall be considered ducts or plenum chambers, shall be constructed and sealed in accordance with Section 503.2.7.2 of this code.	
	403.3.3	Building framing cavities shall not be used as supply ducts.	
Water heaters	403.4	Heat trap required for vertical pipe risers. Comply with efficiencies in Table 403.4.3.2. Provide switch or clearly marked circuit breaker (electric) or shutoff (gas). Circulating system pipes insulated to = R-2 + accessible manual OFF switch.	
Mechanical ventilation	403.5	Homes designed to operate at positive pressure or with mechanical ventilation systems shall not exceed the minimum ASHRAE 62 level. No make-up air from attics, crawlspaces, garages or outdoors adjacent to pools or spas.	
Swimming Pools & Spas	403.9	Pool pumps and pool pump motors with a total horsepower (HP) of = 1 HP shall have the capability of operating at two or more speeds. Spas and heated pools must have vapor-retardant covers or a liquid cover or other means proven to reduce heat loss except if 70% of heat from site-recovered energy. Off/timer switch required. Gas heaters minimum thermal efficiency=78% (82% after 4/16/13). Heat pump pool heaters minimum COP= 4.0.	
Cooling/heating equipment	403.6	Sizing calculation performed & attached. Minimum efficiencies per Tables 503.2.3. Equipment efficiency verification required. Special occasion cooling or heating capacity requires separate system or variable capacity system. Electric heat >10kW must be divided into two or more stages.	
Ceilings/knee walls	405.2.1	R-19 space permitting.	

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE INDEX* = 80

The lower the EnergyPerformance Index, the more efficient the home.

13715 78th St., Live Oak, FL,

1. New construction or existing	New (From Plans)	9. Wall Types	Insulation	Area
2. Single family or multiple family	Single-family	a. Frame - Wood, Exterior	R=13.0	1516.50 ft ²
3. Number of units, if multiple family	1	b. Frame - Wood, Adjacent	R=13.0	216.00 ft ²
4. Number of Bedrooms	3	c. N/A	R=	ft ²
5. Is this a worst case?	Yes	d. N/A	R=	ft ²
6. Conditioned floor area (ft ²)	1985	10. Ceiling Types	Insulation	Area
7. Windows**	Description	a. Under Attic (Vented)	R=30.0	2031.00 ft ²
a. U-Factor:	DbI, U=0.35	b. N/A	R=	ft ²
SHGC:	SHGC=0.35	c. N/A	R=	ft ²
b. U-Factor:	N/A	11. Ducts	R	ft ²
SHGC:		a. Sup: Attic, Ret: Attic, AH: Main	6	397
c. U-Factor:	N/A	12. Cooling systems	kBtu/hr	Efficiency
SHGC:		a. Central Unit	45.0	SEER:13.00
d. U-Factor:	N/A	13. Heating systems	kBtu/hr	Efficiency
SHGC:		a. Electric Heat Pump	45.0	HSPF:7.70
Area Weighted Average Overhang Depth:	2.513 ft.	14. Hot water systems	Cap: 40 gallons	
Area Weighted Average SHGC:	0.350	a. Electric	EF: 0.92	
8. Floor Types	Insulation	b. Conservation features		
a. Slab-On-Grade Edge Insulation	R=0.0	None		
b. N/A	R=	15. Credits	Pstat	
c. N/A	R=			

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: This is not a Building Energy Rating. If your Index is below 70, your home may qualify for energy efficient mortgage (EEM) incentives if you obtain a Florida EnergyGauge Rating. Contact the EnergyGauge Hotline at (321) 638-1492 or see the EnergyGauge web site at energygauge.com for information and a list of certified Raters. For information about the Florida Building Code, Energy Conservation, contact the Florida Building Commission's support staff.

**Label required by Section 303.1.3 of the Florida Building Code, Energy Conservation, if not DEFAULT.

Residential System Sizing Calculation

Summary

Durham
13715 78th St.
Live Oak, FL

Project Title:
1208001a

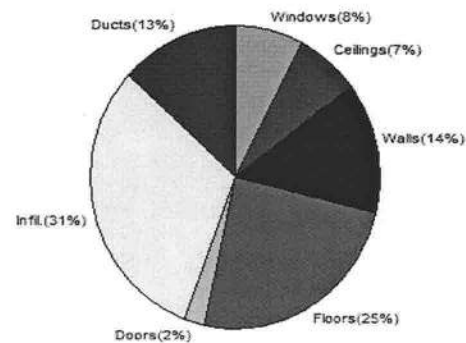
1/24/2013

Location for weather data: Gainesville, FL - Defaults: Latitude(29.7) Altitude(152 ft.) Temp Range(M)			
Humidity data: Interior RH (50%) Outdoor wet bulb (77F) Humidity difference(54gr.)			
Winter design temperature(MJ8 99%)	33 F	Summer design temperature(MJ8 99%)	92 F
Winter setpoint	70 F	Summer setpoint	75 F
Winter temperature difference	37 F	Summer temperature difference	17 F
Total heating load calculation	34024 Btuh	Total cooling load calculation	38463 Btuh
Submitted heating capacity	% of calc Btuh	Submitted cooling capacity	% of calc Btuh
Total (Electric Heat Pump)	132.3 45000	Sensible (SHR = 0.75)	116.3 33750
Heat Pump + Auxiliary(0.0kW)	132.3 45000	Latent	119.0 11250
		Total (Electric Heat Pump)	117.0 45000

WINTER CALCULATIONS

Winter Heating Load (for 1985 sqft)

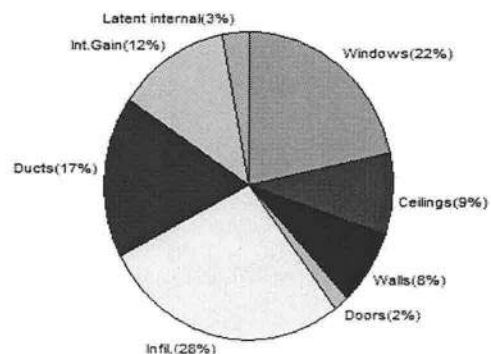
Load component		Load	
Window total	207 sqft	2685	Btuh
Wall total	1472 sqft	4834	Btuh
Door total	53 sqft	789	Btuh
Ceiling total	2031 sqft	2393	Btuh
Floor total	1985 sqft	8405	Btuh
Infiltration	257 cfm	10401	Btuh
Duct loss		4517	Btuh
Subtotal		34024	Btuh
Ventilation	0 cfm	0	Btuh
TOTAL HEAT LOSS		34024	Btuh



SUMMER CALCULATIONS

Summer Cooling Load (for 1985 sqft)

Load component		Load	
Window total	207 sqft	8306	Btuh
Wall total	1472 sqft	2957	Btuh
Door total	53 sqft	597	Btuh
Ceiling total	2031 sqft	3363	Btuh
Floor total		0	Btuh
Infiltration	193 cfm	3584	Btuh
Internal gain		4780	Btuh
Duct gain		5425	Btuh
Sens. Ventilation	0 cfm	0	Btuh
Blower Load		0	Btuh
Total sensible gain		29013	Btuh
Latent gain(ducts)		1212	Btuh
Latent gain(infiltration)		7038	Btuh
Latent gain(ventilation)		0	Btuh
Latent gain(internal/occupants/other)		1200	Btuh
Total latent gain		9450	Btuh
TOTAL HEAT GAIN		38463	Btuh



8th Edition

EnergyGauge® System Sizing

PREPARED BY: Erin Beamsley

DATE: 1/24/13

System Sizing Calculations - Winter

Residential Load - Whole House Component Details

Durham
13715 78th St.
Live Oak, FL

Project Title:
1208001a
Building Type: User

1/24/2013

Reference City: Gainesville, FL (Defaults) Winter Temperature Difference: 37.0 F (MJ8 99%)
This calculation is for Worst Case. The house has been rotated 90 degrees.

Component Loads for Whole House							
Window	Panes/Type	Frame	U	Orientation	Area(sqft)	X	Load
1	2, NFRC 0.35	Metal	0.35	E	20.0	12.9	259 Btuh
2	2, NFRC 0.35	Metal	0.35	E	90.0	12.9	1166 Btuh
3	2, NFRC 0.35	Metal	0.35	NE	20.0	12.9	259 Btuh
4	2, NFRC 0.35	Metal	0.35	W	30.0	12.9	388 Btuh
5	2, NFRC 0.35	Metal	0.35	W	13.3	12.9	173 Btuh
6	2, NFRC 0.35	Metal	0.35	W	30.0	12.9	388 Btuh
7	2, NFRC 0.35	Metal	0.35	N	4.0	12.9	52 Btuh
	Window Total				207.3(sqft)		2685 Btuh
Walls	Type	Ornt.	Ueff.	R-Value (Cav/Sh)	Area	X	Load
1	Frame - Wood	- Ext	(0.089)	13.0/0.0	361	3.28	1186 Btuh
2	Frame - Wood	- Ext	(0.089)	13.0/0.0	332	3.28	1089 Btuh
3	Frame - Wood	- Ext	(0.089)	13.0/0.0	207	3.28	679 Btuh
4	Frame - Wood	- Ext	(0.089)	13.0/0.0	347	3.28	1140 Btuh
5	Frame - Wood	- Ext	(0.089)	13.0/0.0	30	3.28	97 Btuh
6	Frame - Wood	- Adj	(0.089)	13.0/0.0	196	3.28	644 Btuh
	Wall Total				1472(sqft)		4834 Btuh
Doors	Type	Storm	Ueff.		Area	X	Load
1	Insulated - Exterior, n		(0.400)		13	14.8	197 Btuh
2	Insulated - Garage, n		(0.400)		20	14.8	296 Btuh
3	Insulated - Exterior, n		(0.400)		20	14.8	296 Btuh
	Door Total				53(sqft)		789 Btuh
Ceilings	Type/Color/Surface		Ueff.	R-Value	Area	X	Load
1	Vented Attic/D/Shing		(0.032)	30.0/0.0	2031	1.2	2393 Btuh
	Ceiling Total				2031(sqft)		2393 Btuh
Floors	Type		Ueff.	R-Value	Size	X	Load
1	Slab On Grade		(1.180)	0.0	192.5 ft(perim.)	43.7	8405 Btuh
	Floor Total				1985 sqft		8405 Btuh
Envelope Subtotal:							19106 Btuh
Infiltration	Type	Wholehouse	ACH	Volume(cuft)	Wall Ratio	CFM=	Load
	Natural		0.86	17865	1.00	256.8	10401 Btuh
Duct load	Average sealed, R6.0, Supply(Att), Return(Att)					(DLM of 0.153)	4517 Btuh
All Zones	Sensible Subtotal All Zones						34024 Btuh

Manual J Winter Calculations

Residential Load - Component Details (continued)

Durham
13715 78th St.
Live Oak, FL

Project Title:
1208001a
Building Type: User

1/24/2013

WHOLE HOUSE TOTALS

Totals for Heating	Subtotal Sensible Heat Loss	34024 Btuh
	Ventilation Sensible Heat Loss	0 Btuh
	Total Heat Loss	34024 Btuh

EQUIPMENT

1. Electric Heat Pump	#	45000 Btuh
-----------------------	---	------------

Key: Window types - NFRC (Requires U-Factor and Shading coefficient(SHGC) of glass as numerical values)
or - Glass as 'Clear' or 'Tint' (Uses U-Factor and SHGC defaults)
U - (Window U-Factor)
HTM - (ManualJ Heat Transfer Multiplier)



Version 8

System Sizing Calculations - Summer

Residential Load - Whole House Component Details

Durham
13715 78th St.
Live Oak, FL

Project Title:
1208001a

1/24/2013

Reference City: Gainesville, FL Temperature Difference: 17.0F(MJ8 99%) Humidity difference: 54gr.
This calculation is for Worst Case. The house has been rotated 90 degrees.

Component Loads for Whole House

Window	Type*					Overhang		Window Area(sqft)			HTM		Load			
	Panes	SHGC	U	InSh	IS Ornt	Len	Hgt	Gross	Shaded	Unshaded	Shaded	Unshaded				
1	2 NFRC	0.35, 0.35	No	No	E	1.5ft	1.0ft	20.0	1.0	19.0	13	40	768	Btuh		
2	2 NFRC	0.35, 0.35	No	No	E	1.5ft	1.0ft	90.0	4.4	85.6	13	40	3456	Btuh		
3	2 NFRC	0.35, 0.35	No	No	NE	12.0f	1.0ft	20.0	0.0	20.0	13	29	589	Btuh		
4	2 NFRC	0.35, 0.35	No	No	W	1.5ft	1.0ft	30.0	1.5	28.5	13	40	1152	Btuh		
5	2 NFRC	0.35, 0.35	No	No	W	1.5ft	1.0ft	13.3	0.5	12.8	13	40	516	Btuh		
6	2 NFRC	0.35, 0.35	No	No	W	1.5ft	1.0ft	30.0	1.5	28.5	13	40	1152	Btuh		
7	2 NFRC	0.35, 0.35	No	No	N	1.5ft	1.0ft	4.0	0.0	4.0	13	13	53	Btuh		
	Excursion												619	Btuh		
	Window Total							207 (sqft)					8306	Btuh		
Walls	Type						U-Value	R-Value	Area(sqft)		HTM		Load			
								Cav/Sheath								
1	Frame - Wood - Ext						0.09	13.0/0.0	361.0		2.1		753 Btuh			
2	Frame - Wood - Ext						0.09	13.0/0.0	331.5		2.1		691 Btuh			
3	Frame - Wood - Ext						0.09	13.0/0.0	206.7		2.1		431 Btuh			
4	Frame - Wood - Ext						0.09	13.0/0.0	347.0		2.1		724 Btuh			
5	Frame - Wood - Ext						0.09	13.0/0.0	29.7		2.1		62 Btuh			
6	Frame - Wood - Adj						0.09	13.0/0.0	196.0		1.5		296 Btuh			
	Wall Total							1472 (sqft)					2957 Btuh			
Doors	Type						Area (sqft)			HTM		Load				
1	Insulated - Exterior						13.3			11.2		149 Btuh				
2	Insulated - Garage						20.0			11.2		224 Btuh				
3	Insulated - Exterior						20.0			11.2		224 Btuh				
	Door Total							53 (sqft)					597 Btuh			
Ceilings	Type/Color/Surface						U-Value	R-Value	Area(sqft)		HTM		Load			
1	Vented Attic/DarkShingle						0.032	30.0/0.0	2031.0		1.66		3363 Btuh			
	Ceiling Total							2031 (sqft)					3363 Btuh			
Floors	Type						R-Value		Size		HTM		Load			
1	Slab On Grade						0.0		1985 (ft-perimeter)		0.0		0 Btuh			
	Floor Total							1985.0 (sqft)					0 Btuh			
	Envelope Subtotal:												15224 Btuh			
Infiltration	Type						Average ACH		Volume(cuft)		Wall Ratio		CFM=		Load	
	Natural						0.65		17865		1		192.6		3584 Btuh	
Internal gain							Occupants		Btuh/occupant		Appliance		Load			
									X 230		+ <th colspan="2">4780 Btuh</th>		4780 Btuh			
	Sensible Envelope Load:												23588 Btuh			
Duct load	Average sealed, Supply(R6.0-Attic), Return(R6.0-Attic)										(DGM of 0.230)		5425 Btuh			
	Sensible Load All Zones												29013 Btuh			

Manual J Summer Calculations

Residential Load - Component Details (continued)

Durham
13715 78th St.
Live Oak, FL

Project Title:
1208001a

Climate:FL_GAINESVILLE_REGIONAL_A

1/24/2013

WHOLE HOUSE TOTALS

Whole House Totals for Cooling	Sensible Envelope Load All Zones	23588 Btuh
	Sensible Duct Load	5425 Btuh
	Total Sensible Zone Loads	29013 Btuh
	Sensible ventilation	0 Btuh
	Blower	0 Btuh
	Total sensible gain	29013 Btuh
	Latent infiltration gain (for 54 gr. humidity difference)	7038 Btuh
	Latent ventilation gain	0 Btuh
	Latent duct gain	1212 Btuh
	Latent occupant gain (6.0 people @ 200 Btuh per person)	1200 Btuh
	Latent other gain	0 Btuh
	Latent total gain	9450 Btuh
	TOTAL GAIN	38463 Btuh

EQUIPMENT

1. Central Unit	#	45000 Btuh
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*Key: Window types (Panels - Number and type of panes of glass)
 (SHGC - Shading coefficient of glass as SHGC numerical value)
 (U - Window U-Factor)
 (InSh - Interior shading device: none(No), Blinds(B), Draperies(D) or Roller Shades(R))
 - For Blinds: Assume medium color, half closed
 For Draperies: Assume medium weave, half closed
 For Roller shades: Assume translucent, half closed
 (IS - Insect screen: none(N), Full(F) or Half(½))
 (Ornt - compass orientation)



Version 8

Columbia County Building Permit Application

For Office Use Only Application # 1302-18 Date Received 2-12-13 By CH Permit # 30778

Zoning Official _____ Date _____ Flood Zone _____ Land Use _____ Zoning _____

FEMA Map # _____ Elevation _____ MFE _____ River _____ Plans Examiner _____ Date _____

Comments _____

☒ NOC ☐ EH ☒ Deed or PA ☐ Site Plan ☐ State Road Info ☐ Well letter ☐ 911 Sheet ☐ Parent Parcel # _____

☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter

IMPACT FEES: EMS _____ Fire _____ Corr _____ ☐ Sub VF Form

Road/Code _____ School _____ = TOTAL (Suspended) ☐ Ellisville Water ☐ App Fee Paid

Septic Permit No. N/A Kristina Carey Fax _____

→ Name Authorized Person Signing Permit MICHAEL CAREY Phone 386 758 3139

Address 1025 SW DEKLE RD. LAKE CITY FLA. 32024

→ Owners Name MICHAEL CAREY & Kristina Carey Phone 386 758 3139

911 Address SAME AS ABOVE

→ Contractors Name Owner Builder Phone _____

Address SAME AS ABOVE

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. - Progress Energy

Property ID Number 07-45-16-02806-023 Estimated Cost of Construction 5432.78

Subdivision Name AKA: Parcel 2-S Lot _____ Block _____ Unit _____ Phase _____

Driving Directions DOWN 90 W TO 252B LEFT TO DEPUTY DAVIS RIGHT TO PINEMOUNT LEFT TO DEKLE RD LEFT ONE MILE ON LEFT Number of Existing Dwellings on Property 1

Construction of Metal re-roof SFD Total Acreage 5.02 Lot Size 5.02

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 ✓ Side ✓ Side ✓ Rear ✓

Number of Stories 1 Heated Floor Area ✓ Total Floor Area ✓ Roof Pitch 6-12

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. **CODE: Florida Building Code 2010 and the 2008 National Electrical Code.**

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.

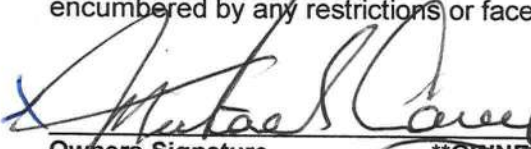
FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment: According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor 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. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

 (Owners Must Sign All Applications Before Permit Issuance.)

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.

Contractor's Signature (Permitee)

Contractor's License Number _____

Columbia County

Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this ____ day of _____ 20__.

Personally known _____ or Produced Identification _____

SEAL:

State of Florida Notary Signature (For the Contractor)

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

07-45-16-02-806-023

Clerk's Office Stamp

Inst: 201312002216 Date: 2/12/2013 Time: 4:43 PM
DC, P. DeWitt Cason, Columbia County Page 1 of 1 B: 1249 P: 1329

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): Acct: Parcel 2-5
a) Street (job) Address: 1025 SW DEKLE RD. LAKE CITY FL 32024
2. General description of improvements: Re-Roof SFD
3. Owner Information
a) Name and address: Kristina Carey & MICHAEL CAREY 1025 SW DEKLE RD LAKE CITY FL 32024
b) Name and address of fee simple titleholder (if other than owner)
c) Interest in property
4. Contractor Information
a) Name and address: Owner Builder
b) Telephone No.: Fax No. (Opt.)
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

Michael Carey
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager
Michael Carey
Printed Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 12 day of February, 2013, by:
Michael Carey as Owner (type of authority, e.g. officer, trustee, attorney
fact) for Self (name of party on behalf of whom instrument was executed).

Personally Known OR Produced Identification X Type Ac DL

Notary Signature Lax Nado 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.

Michael Carey
Signature of Natural Person Signing (the line that above.)

PRODUCT APPROVAL SPECIFICATION SHEET

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products.

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
1. EXTERIOR DOORS			
A. SWINGING			
B. SLIDING			
C. SECTIONAL			
D. ROLL UP			
E. AUTOMATIC			
F. OTHER			
2. WINDOWS			
A. SINGLE HUNG			
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. DOUBLE HUNG			
E. FIXED			
F. AWNING			
G. PASS THROUGH			
H. PROJECTED			
I. MULLION			
J. WIND BREAKER			
K. DUAL ACTION			
L. OTHER			
3. PANEL WALL			
A. SIDING			
B. SOFFITS			
C. EIFS			
D. STOREFRONTS			
E. CURTAIN WALLS			
F. WALL LOUVER			
G. GLASS BLOCK			
H. MEMBRANE			
I. GREENHOUSE			
J. OTHER			
4. ROOFING PRODUCTS			
A. ASPHALT SHINGLES			
B. UNDERLAYMENTS			
C. ROOFING FASTENERS			
D. NON-STRUCTURAL METAL ROOFING	TRI COUNTY METAL LIVE OAK FL.	ULTRA RIB ROOF PANEL 26 GA. 36" COVERAGE 3/4" TALL RIB	13332.1
E. WOOD SHINGLES AND SHAKES			13332.1
F. ROOFING TILES			
G. ROOFING INSULATION			
H. WATERPROOFING			
I. BUILT UP ROOFING ROOF SYSTEMS			
J. MODIFIED BITUMEN			
K. SINGLE PLY ROOF SYSTEMS			
L. ROOFING SLATE			
M. CEMENTS-ADHESIVES COATINGS			

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
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N. LIQUID APPLIED ROOF SYSTEMS			
O. ROOF TILE ADHESIVE			
P. SPRAY APPLIED * POLYURETHANE ROOF			
Q. OTHER			
5. SHUTTERS			
A. ACCORDION			
B. BAHAMA			
C. STORM PANELS			
D. COLONIAL			
E. ROLL-UP			
F. EQUIPMENT			
G. OTHERS			
6. SKYLIGHTS			
A. SKYLIGHT			
B. OTHER			
7. STRUCTURAL COMPONENTS			
A. WOOD CONNECTORS/ ANCHORS			
B. TRUSS PLATES			
C. ENGINEERED LUMBER			
D. RAILING			
E. COOLERS-FREEZERS			
F. CONCRETE ADMIXTURES			
G. MATERIAL			
H. INSULATION FORMS			
I. PLASTICS			
J. DECK-ROOF			
K. WALL			
L. SHEDS			
M. OTHER			
8. NEW EXTERIOR ENVELOPE PRODUCTS			
A.			
B.			

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) the performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements. Further, I understand these products may have to be removed if approval cannot be demonstrated during inspection.


APPLICANT SIGNATURE

02-12-2013
DATE

Columbia County Property Appraiser

CAMA updated: 2/1/2013

2012 Tax Year

Parcel: 07-4S-16-02806-023

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

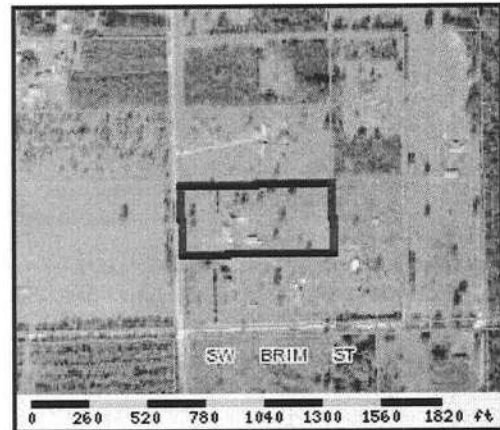
Interactive GIS Map

Print

Search Result: 1 of 1

Owner & Property Info

Owner's Name	CAREY MICHAEL III & KRISTINA		
Mailing Address	1025 SW DEKLE RD LAKE CITY, FL 32024		
Site Address	1025 SW DEKLE RD		
Use Desc. (code)	SINGLE FAM (000100)		
Tax District	3 (County)	Neighborhood	7416
Land Area	5.020 ACRES	Market Area	01
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. COMM NE COR OF W3/4 OF SE1/4 OF SW1/4, RUN W 1007.07 FT TO E R/W DEKLE RD, RUN S 674.44 FT FOR POB, RUN E 680.71 FT, S 320.94 FT, W 681.98 FT, N 320.94 FT TO POB. AKA PARCEL 2-S. ORB 790-1566. WD 1083-2392.		



Property & Assessment Values

2012 Certified Values		
Mkt Land Value	cnt: (0)	\$29,286.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (1)	\$107,122.00
XFOB Value	cnt: (9)	\$36,606.00
Total Appraised Value		\$173,014.00
Just Value		\$173,014.00
Class Value		\$0.00
Assessed Value		\$173,014.00
Exempt Value	(code: HX H3 13)	\$173,014.00
Total Taxable Value	Cnty: \$0 Other: \$0 Schl: \$0	

2013 Working Values

NOTE:
2013 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
5/15/2006	1083/2392	WD	I	Q		\$269,900.00
5/19/1994	790/1566	WD	V	Q		\$17,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
2	SINGLE FAM (000100)	1996	COMMON BRK (19)	1486	2307	\$105,861.00
Note: All S.F. calculations are based on <u>exterior</u> building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0166	CONC,PAVMT	1996	\$1,635.00	0000545.000	0 x 0 x 0	(000.00)
0060	CARPORT F	1996	\$2,000.00	0000400.000	20 x 20 x 0	(000.00)
0296	SHED METAL	1996	\$1,120.00	0000080.000	8 x 10 x 0	(000.00)
0120	CLFENCE 4	2006	\$449.00	0000092.000	0 x 0 x 0	(000.00)



COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

Office: 386-758-1008 Fax: 386-758-2160

OWNER BUILDER DISCLOSURE STATEMENT

I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed and bonded in Florida and to list his or her license numbers on permits and contracts.

I understand that I may build or improve a one-family or two-family residence or farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.

I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.

I understand that it is frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

I understand that I 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 my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 850-487-1395 or Internet website address <http://www.myflorida.com/dbpr/pro/cilb/index.html> for more information about licensed contractors.

I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address:

X 1025 SW Delke Rd Lacey City FL 32024.

I agree to notify Columbia County Building Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure. Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

I understand that if I hire subcontractors they must be licensed for that type of work in Columbia County, ex: framing, stucco, masonry, and state registered builders. Registered Contractors must have a minimum of \$300,000.00 in General Liability insurance coverage and the proper workers' compensation. Specialty Contractors must have a minimum of \$100,000.00 in General Liability insurance coverage and the proper workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to Columbia County Building Department.

TYPE OF CONSTRUCTION

- ☐ Single Family Dwelling ☐ Two-Family Residence ☐ Farm Outbuilding
☒ Addition, Alteration, Modification or other Improvement
☐ Commercial, Cost of Construction _____ Construction of _____
☐ Other _____

I Michael Carey / Kristina Carey, have been advised of the above disclosure statement for exemption from contractor licensing as an owner/builder. I agree to comply with all requirements provided for in Florida Statutes allowing this exception for the construction permitted by Columbia County Building Permit.

Michael Carey
Owner Builder Signature

02-12-2013
Date

NOTARY OF OWNER BUILDER SIGNATURE

The above signer is personally known to me or produced identification _____

Notary Signature L. H. Date 2-12-13

(Seal)

FOR BUILDING DEPARTMENT USE ONLY

I hereby certify that the above listed owner builder has been given notice of the restriction stated above.

Building Official/Representative L. H.



Revised: 7-23-09
DISCLOSURE STATEMENT 09
Documents: B&Z Forms

CERTIFICATE OF OCCUPANCY

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 36-3S-16-00302-104

Building permit No. 000030779

Use Classification SFD/UTILITY

Fire: 24.44

Permit Holder DOUG EDGLEY

Waste: 33.50

Owner of Building KENNETH & REBECCA DURHAM

Total: 57.94

Location: 307 SW WAVERLY LN, LAKE CITY, FL 32025

Date: 08/15/2013

Joy Car

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)



30779



CAL-TECH TESTING, INC.

ENGINEERING & TESTING LABORATORY

P.O. Box 1625, Lake City, FL 32056-1625
450 SR. 13 N. • Suite 206-308 • Jacksonville, FL 32259

Lake City • (386) 755-3633

Fax • (386) 752-5456

Jacksonville • (904) 381-8901

Fax • (904) 381-8902

JOB NO.:

DATE TESTED: 2-25-13

REPORT OF IN-PLACE DENSITY TEST

ASTM METHOD: ✓ (D-2922) Nuclear (D-2937) Drive Cylinder Other

PROJECT: Durham Residence

CLIENT: Kenneth & Rebecca Durham

GENERAL CONTRACTOR: Edgley Const. EARTHWORK CONTRACTOR: S.A.G.C.

SOIL USE (SEE NOTE): ① SPECIFICATION REQUIREMENTS: 95%

TECHNICIAN: C. Day

MODIFIED (ASTM D-1557): ✓ STANDARD (ASTM D-698):

TEST NO.	TEST LOCATION	TEST:	PROCTOR NO.	WET DENS. LBS./CU.FT.	DRY DENS. LBS./CU.FT.	MOIST PERCENT	% MAX. DENS.
		DEPTH ELEV. LIFT					
1	D.F. Corner 16' west x 10' south	12"	1	120.5	104.8	14.9	95
2	Approx. Center of pad	12"	1	125.5	111.4	12.6	101
3	S.W. Corner 14' north x 14' east	12"	1	122.4	108.4	12.9	99

REMARKS:

PROCTOR NO.	SOIL DESCRIPTION	PROCTOR VALUE	OPT. MOIST.
1		110	

NOTE: 1. Building Fill 2. Trench Backfill 3. Base Course 4. Subbase/Stabilized Subgrade 5. Embankment 6. Subgrade/Natural Soil 7. Other
The test results presented in this report are specific only to the samples tested at the time of testing. The tests were performed in accordance with generally accepted methods and standards. Since material conditions can vary between test location and change with time, sound judgement should be exercised with regard to the use and interpretation of the data.

30779

New Construction Subterranean Termite Service Record

OMB Approval No. 2502-0525
(exp. 02/29/2012)

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 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, therefore, no assurance of confidentiality is provided.

This report is submitted for informational purposes to the builder on proposed (new) construction cases when 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 company and builder, unless stated otherwise.

Section 1: General Information (Pest Control Company Information)

Company Name: Aspen Pest Control, INC

Company Address P.O. Box 1795 City Lake City State FL Zip 32056

Company Business License No. JB182948 Company Phone No. 386-755-3611

FHA/VA Case No. (if any) _____

Section 2: Builder Information

Company Name Edgely Construction Phone No. 623-6654

Section 3: Property Information

Location of Structure (s) Treated (Street Address or Legal Description, City, State and Zip) Ken and Rebecca Dunham
307 Traverly Ln Lake City, FL 32056

Section 4: Service Information

Date(s) of Service(s) Edgely Construction 3-4-2013

Type of Construction (More than one box may be checked) ☒ Slab ☐ Basement ☐ Crawl ☐ Other _____

Check all that apply:

☒ A. Soil Applied Liquid Termiticide

Brand Name of Termiticide: Bifen XTS EPA Registration No. 53883-189

Approx. Dilution (%): 0.06 Approx. Total Gallons Mix Applied: 450 Treatment completed on exterior: ☐ Yes ☒ No

☐ B. Wood Applied Liquid Termiticide

Brand Name of Termiticide: _____ EPA Registration No. _____

Approx. Dilution (%): _____ Approx. Total Gallons Mix Applied: _____

☐ C. Bait system installed

Name of System _____ EPA Registration No. _____ Number of Stations installed _____

☐ D. Physical Barrier System installed

Name of System _____ Attach installation information (required)

Service Agreement Available? ☒ Yes ☐ No

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

Attachments (List) _____

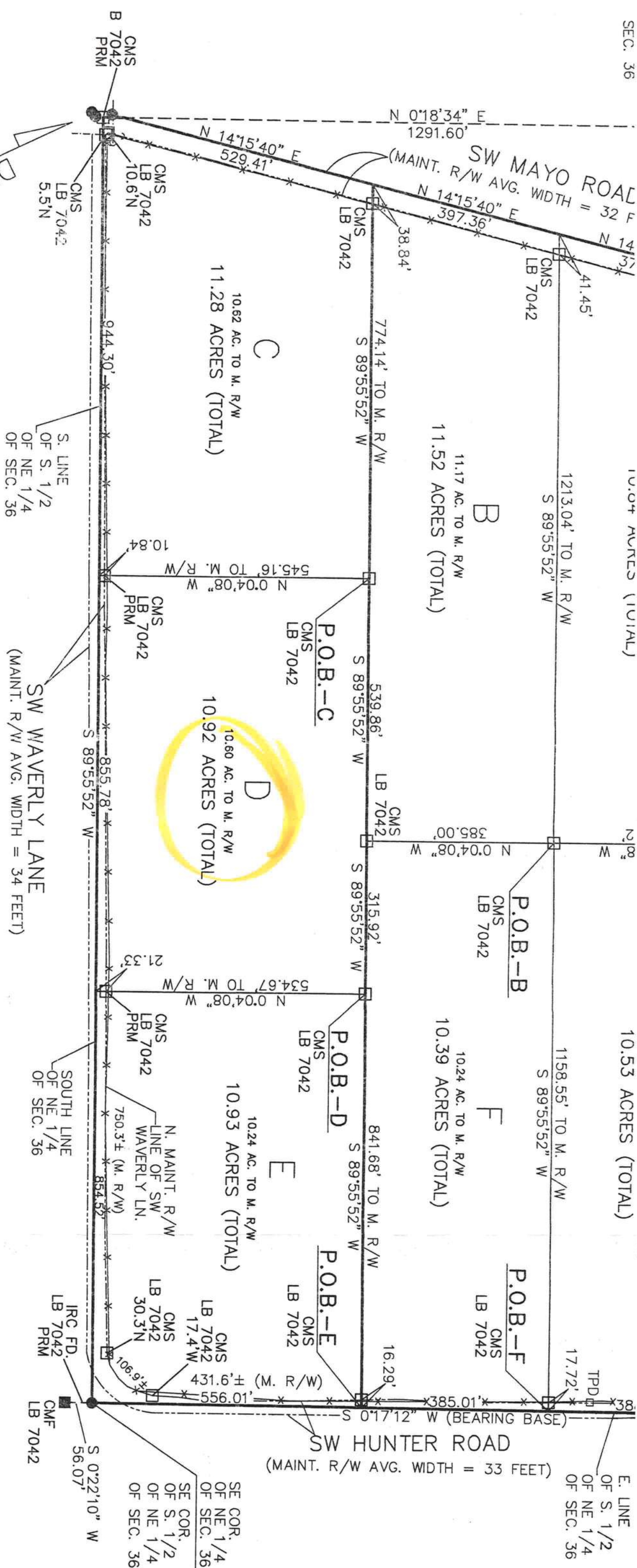
Comments _____

Name of Applicator(s) C. Lacey Certification No. (if required by State law) _____

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

Authorized Signature Chf Lacey Date 3-4-2013

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)



NOTES:

- 1.) Monumentation is as shown and designated on the face of the plat.
- 2.) Boundary based on instruction from client, monumentation found in place, parent tract description furnished by client, prior survey by this Company.
- 3.) Bearings projected from East section line and based on above referenced prior survey by this Company.
- 4.) Interior improvements, if present, were not located with this survey.
- 5.) Underground encroachments, if present, were not located with this survey.
- 6.) This survey was made without benefit of a title search. There may be additional easements, restrictions, etc. not shown hereon but found in the Public Records. Issues regarding title, land use & zoning, easements



Kenneth & Rebecca Durham Residence

Lake City, FL rev 030713



: <Not Found>

ADDRESS: Hunter Road
JOB DESCRIPTION: Doug Edgley
/: Durham Res II
JOB #: 13-029B
DESIGNER: ColeMan Burlingame
SALESMAN: Curt V Burlingame

JOB NO:
13-029B

PAGE NO:

1 OF 1