

DATE 01/18/2005

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022707

APPLICANT DAVE SMITH PHONE 454-8572
ADDRESS 1117 SW RUM ISLAND TERRACE FT. WHITE FL 32038
OWNER MARY-ANN & DAVE SMITH PHONE 454-8572
ADDRESS 1117 SW RUM ISLAND TERRACE FT. WHITE FL 32038
CONTRACTOR OWNER BUILDER PHONE 454-8572
LOCATION OF PROPERTY 47S, TL ON 138, TR ON RUM ISLAND TERR., 1 MILE ON LEFT, AS
ROAD CURVES
TYPE DEVELOPMENT SFD,UTILITY ESTIMATED COST OF CONSTRUCTION 78000.00
HEATED FLOOR AREA TOTAL AREA HEIGHT .00 STORIES 1
FOUNDATION WOOD WALLS FRAMED ROOF PITCH 8/12 FLOOR WOOD
LAND USE & ZONING A-3 MAX. HEIGHT 21
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 35-7S-16-04346-019 SUBDIVISION RUM ISLAND RANCHES
LOT 5 BLOCK PHASE UNIT TOTAL ACRES 10.00

Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 03-0602-N BK RJ N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD, NOC ON FILE

Check # or Cash 1068

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

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

BUILDING PERMIT FEE \$ 390.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$
FLOOD ZONE DEVELOPMENT FEE \$ CULVERT FEE \$ TOTAL FEE 440.00

INSPECTORS OFFICE CLERKS OFFICE

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

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

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.

Inst:2002023535 Date:11/27/2002 Time:10:06

Doc Stamp-Deed : 350.00

YMK DC, P. DeWitt Cason, Columbia County B:968 P:1413

Recording: \$ 10.50
Doc Stamps: \$ 350.00
\$ 360.50

THIS INSTRUMENT PREPARED BY AND RETURN TO:

✓ C. Wharton Cole, Esquire
Chandler, Lang, Haswell & Cole, P.A.
Post Office Box 23879
Gainesville, Florida 32602

WARRANTY DEED

THIS INDENTURE, made this 26 day of **November, 2002**, between **J. E. MOTES, JR., individually and as TRUSTEE**, and his wife, **DENISE A. MOTES**, whose mailing address is: **5026 31st Avenue North, St. Petersburg, FL 33710**, hereinafter called the "Grantor", and **DAVID M. SMITH and his wife, MARY ANN SMITH**, whose mailing address is: **304 NE 9th Street, Gainesville, FL 32601**, whose Social Security numbers respectively are: _____ and _____, hereinafter called the "Grantees".

WITNESSETH, that said Grantor, for and in consideration of the sum of Ten and No/100 Dollars, and other good and valuable consideration to said Grantor in hand paid by said Grantees, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said Grantees, and Grantees' heirs and assigns forever the following described land, situate, lying and being in **Columbia County, Florida**, to-wit:

A tract of land situated in Section 35, Township 7 South, Range 16 East, Columbia County, Florida, said tract of land being known as Tract 5 of Rum Island Ranches an unrecorded subdivision being more particularly described as follows:

Commence at a concrete monument at the S.E. corner of the N.E. 1/4 of the aforementioned Section 35, Township 7 South, Range 16 East for the Point of Beginning and run S.89°41'00"W., along the South line of said N.E. 1/4, a distance of 332.43 feet to a steel rod and cap at the S.E. corner of the West 1/2 of the East 1/2 of the South 1/2 of Government Lot 1 of said Section 35; thence run N.00°06'03"E., a distance of 1328.40 feet to the N.E. corner of said West 1/2 of the East 1/2 of South 1/2 of Government Lot 1; thence run N.89°33'10"E., along the North line of said South 1/2 of Government Lot 1, a distance of 332.29 feet to a concrete monument at the N.E. corner of said South 1/2 of Government Lot 1; thence run S.00°05'40"W., a distance of 1329.16 feet to the True Point of Beginning, containing 10.138 acres more or less.

This deed conveys the entire fee simple interest and any and all oil, mineral, or other interests in, to, against, for, or from the property.

Subject to the County right of way along the North boundary thereof.

Subject to an Easement over the East 50 feet of the above described property and any other easement of record.

This property is vacant land and is not and never has been the homestead of Grantor(s).

Tax Parcel Number: 04346-019

SUBJECT TO taxes for 2002 and subsequent years, and restrictions and easements of record, and all applicable zoning ordinances, other governmental regulations, and governmental statutes affecting the use of the subject property.

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

TO HAVE AND HOLD the same in fee simple forever.

AND the Grantor hereby covenants with said Grantee that it is lawfully seized of said land in fee simple; that it has good right and lawful authority to sell and convey said land; that it 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 as stated herein.

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

Inst: 2002023535 Date: 11/27/2002 Time: 10:06
Doc Stamp-Deed : 350.00
MCK DC, P. DeWitt Cason, Columbia County B: 968 P: 1414

above written.

Signed, sealed and delivered
in our presence:

Daniel Lee
Name: Daniel Lee
Address: 1935 Cobblestone Way
Clearwater, FL 33760

MICHAEL J. FLANIGAN
Name: _____
Address: 5046 31st AVE N
St. Pete FL - 33710

Helen Flanigan
Name: Helen Flanigan
Address: 5046 31st AVE N
St Petersburg FL 33710

Marion R Peck
Name: MARION R PECK
Address: 5036 31st AVE N
St Petersburg FL 33710

STATE OF FLORIDA
COUNTY OF Pinellas

I HEREBY CERTIFY that the foregoing instrument was sworn to, subscribed and acknowledged before me on this day by J. E. MOTES, JR., Individually and as Trustee, who is personally known to me or who has produced Travis L. L. L. as identification and who did (did not) take an oath.

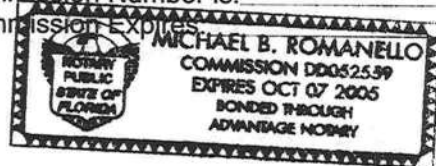
WITNESS my hand and official seal in the County and State last aforesaid, this 20th day of November, 2002.

By: J. E. Motes Jr. (SEAL)
J. E. MOTES, JR., Individually
and as Trustee

Travis L. L. L.

By: Denise Motes (SEAL)
DENISE A. MOTES, Individually

W. B. Romanello
Notary Public, State of Florida at Large
My Commission Number is: _____
My Commission Expires: _____

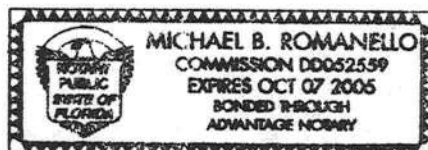


STATE OF FLORIDA
COUNTY OF Pinellas

I HEREBY CERTIFY that the foregoing instrument was sworn to, subscribed and acknowledged before me on this day by DENISE A. MOTES, who is personally known to me or who has produced Denise A. Motes as identification and who did (did not) take an oath.

WITNESS my hand and official seal in the County and State last aforesaid, this 20th day of November, 2002.

W. B. Romanello
Notary Public, State of Florida at Large
My Commission Number is: _____
My Commission Expires: _____



Columbia County Building Permit Application

Revised 9-23-0

For Office Use Only Application # 0501-11 Date Received 1/10/05 By JW Permit # 22707
Application Approved by - Zoning Official BLK Date 18.01.05 Plans Examiner KD Date 1-18-05
Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3
Comments Sealed JESS RACHON

Applicants Name MARYANN + DAVE SMITH Phone 386 454 8572
Address 1117 SW Rum Island Tern FT White 32038 FL
Owners Name same Phone _____
911 Address same
Contractors Name Self Phone _____
Address _____
Fee Simple Owner Name & Address same
Bonding Co. Name & Address same
Architect/Engineer Name & Address PAT GALGER - JAMES - LIZINS
Mortgage Lenders Name & Address PERSONAL ACCT.
Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Energy
Property ID Number 37-B-16-04346-09 Estimated Cost of Construction _____
Subdivision Name Rum Island Ranches Lot 5 Block _____ Unit _____ Phase _____
Driving Directions 47 S to 138 (L) Rt on Rum Island Tern
go 1 mile as Road curves Rt our gate on
(L)
Type of Construction WOOD frame - SFD Number of Existing Dwellings on Property 0
Total Acreage 10.00 Lot Size _____ Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
Actual Distance of Structure from Property Lines - Front 150' Side 143' Side _____ Rear 160'
Total Building Height _____ Number of Stories 1 Heated Floor Area _____ Roof Pitch _____

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction.

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.

Maryann Smith
Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me

this _____ day of _____ 20____.

Personally known _____ or Produced Identification _____

Contractor Signature _____
Contractors License Number _____
Competency Card Number _____
NOTARY STAMP/SEAL

Notary Signature _____

FLORIDA ENERGY EFFICIENCY CODE
FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

| | | | |
|---------------|------------|----------------------|-----------------|
| Project Name: | DAVE SMITH | Builder: | DAVE SMITH |
| Address: | | Permitting Office: | COLUMBIA COUNTY |
| City, State: | | Permit Number: | 22707 |
| Owner: | DAVE SMITH | 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: 36.0 kBtu/hr |
| 3. Number of units, if multi-family | 1 | | SEER: 12.50 |
| 4. Number of Bedrooms | 3 | b. N/A | |
| 5. Is this a worst case? | No | c. N/A | |
| 6. Conditioned floor area (ft²) | 1560 ft² | | |
| 7. Glass area & type | Single Pane Double Pane | 13. Heating systems | |
| a. Clear glass, default U-factor | 127.5 ft² 174.0 ft² | a. PTHP | Cap: 36.0 kBtu/hr |
| b. Default tint | 0.0 ft² 0.0 ft² | | COP: 3.40 |
| c. Labeled U or SHGC | 0.0 ft² 0.0 ft² | b. N/A | |
| 8. Floor types | | c. N/A | |
| a. Raised Wood, Post or Pier | ft² | | |
| b. N/A | | 14. Hot water systems | |
| c. N/A | | a. Electric Resistance | Cap: 40.0 gallons |
| 9. Wall types | | | EF: 0.90 |
| a. Frame, Wood, Exterior | R=19.0, 1010.5 ft² | b. N/A | |
| b. N/A | | c. Conservation credits | |
| c. N/A | | (HR-Heat recovery, Solar | |
| d. N/A | | DHP-Dedicated heat pump) | |
| e. N/A | | 15. HVAC credits | CF, |
| 10. Ceiling types | | (CF-Ceiling fan, CV-Cross ventilation, | |
| a. Under Attic | R=30.0, 1560.0 ft² | HF-Whole house fan, | |
| b. N/A | | PT-Programmable Thermostat, | |
| c. N/A | | MZ-C-Multizone cooling, | |
| 11. Ducts | | MZ-H-Multizone heating) | |
| a. Sup: Unc. Ret: Unc. AH: Interior | Sup. R=6.0, 30.0 ft | | |
| b. N/A | | | |

Glass/Floor Area: 0.19

Total as-built points: 21944
Total base points: 23621

PASS

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

PREPARED BY: Larry Reomonte A/c

DATE: 09-27-04 / 12-3-04

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 | 1560.0 | 20.04 | 5627.2 | Double, Clear | N | 2.0 | 6.0 | 30.0 | 19.20 | 0.90 | 519.3 |
| | | | | Double, Clear | N | 8.0 | 6.0 | 45.0 | 19.20 | 0.67 | 577.9 |
| | | | | Single, Clear | S | 8.0 | 7.0 | 94.0 | 40.81 | 0.50 | 1920.2 |
| | | | | Double, Clear | E | 2.0 | 6.0 | 36.0 | 42.06 | 0.85 | 1288.2 |
| | | | | Double, Clear | S | 8.0 | 6.0 | 12.0 | 35.87 | 0.48 | 208.4 |
| | | | | Single, Clear | E | 8.0 | 7.0 | 33.5 | 47.92 | 0.48 | 775.1 |
| | | | | Double, Clear | S | 2.0 | 6.0 | 15.0 | 35.87 | 0.78 | 419.2 |
| | | | | Double, Clear | W | 2.0 | 6.0 | 36.0 | 38.52 | 0.85 | 1181.6 |
| | | | | As-Built Total: | | | | | | 301.5 | |
| WALL TYPES Area X BSPM = Points | | | | Type | R-Value | | | Area X | SPM | = Points | |
| Adjacent | 0.0 | 0.00 | 0.0 | Frame, Wood, Exterior | 19.0 | | | 1010.5 | 0.90 | 909.4 | |
| Exterior | 1010.5 | 1.70 | 1717.9 | | | | | | | | |
| Base Total: | | 1010.5 | 1717.9 | As-Built Total: | | | 1010.5 | | | 909.4 | |
| DOOR TYPES Area X BSPM = Points | | | | Type | | | | Area X | SPM | = Points | |
| Adjacent | 0.0 | 0.00 | 0.0 | | | | | | | | |
| Exterior | 0.0 | 0.00 | 0.0 | | | | | | | | |
| Base Total: | | 0.0 | 0.0 | As-Built Total: | | | 0.0 | | | 0.0 | |
| CEILING TYPES Area X BSPM = Points | | | | Type | R-Value | | | Area X | SPM X | SCM = Points | |
| Under Attic | 1560.0 | 1.73 | 2698.8 | Under Attic | 30.0 | | | 1560.0 | 1.73 X 1.00 | 2698.8 | |
| Base Total: | | 1560.0 | 2698.8 | As-Built Total: | | | 1560.0 | | | 2698.8 | |
| FLOOR TYPES Area X BSPM = Points | | | | Type | R-Value | | | Area X | SPM | = Points | |
| Slab | 0.0(p) | 0.0 | 0.0 | Raised Wood, Post or Pier | 19.0 | | | 1560.0 | 0.77 | 1195.0 | |
| Raised | 1560.0 | -3.99 | -6224.4 | | | | | | | | |
| Base Total: | | -6224.4 | | As-Built Total: | | | 1560.0 | | | 1195.0 | |
| INFILTRATION Area X BSPM = Points | | | | Area X SPM = Points | | | | | | | |
| | | 1560.0 | 10.21 | | | | | 1560.0 | 10.21 | 15927.6 | |

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

| BASE | | | | AS-BUILT | | | | | | | | | | | |
|-----------------------------|---|-------------------|---|---------------------------------|------------------|---|-----------|---|------------------------|---|-------------------|---|-------------------|---|----------------|
| Summer Base Points: 19747.1 | | | | Summer As-Built Points: 27620.8 | | | | | | | | | | | |
| Total Summer Points | X | System Multiplier | = | Cooling Points | Total Component | X | Cap Ratio | X | Duct Multiplier | X | System Multiplier | X | Credit Multiplier | = | Cooling Points |
| | | | | | (DM x DSM x AHU) | | | | | | | | | | |
| 19747.1 | | 0.4266 | | 8424.1 | 27620.8 | | 1.000 | | (1.090 x 1.147 x 0.91) | | 0.273 | | 0.950 | | 8151.1 |
| | | | | | 27620.8 | | 1.00 | | 1.138 | | 0.273 | | 0.950 | | 8151.1 |

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 | 1560.0 | 12.74 | 3577.4 | Double, Clear | N | 2.0 | 6.0 | 30.0 | 24.58 | 1.00 | 740.7 |
| | | | | Double, Clear | N | 8.0 | 6.0 | 45.0 | 24.58 | 1.02 | 1129.8 |
| | | | | Single, Clear | S | 8.0 | 7.0 | 94.0 | 20.24 | 2.96 | 5631.0 |
| | | | | Double, Clear | E | 2.0 | 6.0 | 36.0 | 18.79 | 1.06 | 716.8 |
| | | | | Double, Clear | S | 8.0 | 6.0 | 12.0 | 13.30 | 3.15 | 502.1 |
| | | | | Single, Clear | E | 8.0 | 7.0 | 33.5 | 26.41 | 1.32 | 1171.3 |
| | | | | Double, Clear | S | 2.0 | 6.0 | 15.0 | 13.30 | 1.25 | 249.8 |
| | | | | Double, Clear | W | 2.0 | 6.0 | 36.0 | 20.73 | 1.04 | 777.5 |
| | | | | As-Built Total: | | | | 301.5 | | | |
| WALL TYPES Area X BWPM = Points | | | | Type | R-Value | | Area X WPM = Points | | | | |
| Adjacent | 0.0 | 0.00 | 0.0 | Frame, Wood, Exterior | 19.0 | | 1010.5 | 2.20 | | 2223.1 | |
| Exterior | 1010.5 | 3.70 | 3738.9 | | | | | | | | |
| Base Total: 1010.5 3738.9 | | | | As-Built Total: 1010.5 | | | | 2223.1 | | | |
| DOOR TYPES Area X BWPM = Points | | | | Type | Area X WPM = Points | | | | | | |
| Adjacent | 0.0 | 0.00 | 0.0 | | | | | | | | |
| Exterior | 0.0 | 0.00 | 0.0 | | | | | | | | |
| Base Total: 0.0 0.0 | | | | As-Built Total: 0.0 | | | | 0.0 | | | |
| CEILING TYPES Area X BWPM = Points | | | | Type | R-Value | | Area X WPM X WCM = Points | | | | |
| Under Attic | 1560.0 | 2.05 | 3198.0 | Under Attic | 30.0 | | 1560.0 | 2.05 X 1.00 | | 3198.0 | |
| Base Total: 1560.0 3198.0 | | | | As-Built Total: 1560.0 | | | | 3198.0 | | | |
| FLOOR TYPES Area X BWPM = Points | | | | Type | R-Value | | Area X WPM = Points | | | | |
| Slab | 0.0(p) | 0.0 | 0.0 | Raised Wood, Post or Pier | 19.0 | | 1560.0 | 0.88 | | 1366.6 | |
| Raised | 1560.0 | 0.96 | 1497.6 | | | | | | | | |
| Base Total: 1497.6 | | | | As-Built Total: 1560.0 | | | | 1366.6 | | | |
| INFILTRATION Area X BWPM = Points | | | | Area X WPM = Points | | | | | | | |
| 1560.0 -0.59 -920.4 | | | | 1560.0 -0.59 -920.4 | | | | | | | |

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

| BASE | | | | AS-BUILT | | | | | | | |
|-----------------------------|---|-------------------|------------------|---------------------------------|---|-----------|---------------------------------------|---------------------|---------------------|------------------|--|
| Winter Base Points: 11091.4 | | | | Winter As-Built Points: 16786.3 | | | | | | | |
| 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 | |
| 11091.4 | | 0.6274 | 6958.8 | 16786.3 | | 1.000 | (1.069 x 1.169 x 0.93) | 0.294 | 1.000 | 5737.9 | |
| 11091.4 | | 0.6274 | 6958.8 | 16786.3 | | 1.00 | 1.162 | 0.294 | 1.000 | 5737.9 | |

WATER HEATING & CODE COMPLIANCE STATUS
Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

| BASE | | | | AS-BUILT | | | | | |
|---------------|---|------------|---|----------|-----------------|-----------|---|-------|------------|
| WATER HEATING | | | | Tank | EF | Number of | X | Tank | X |
| Number of | X | Multiplier | = | Total | Volume | Bedrooms | | Ratio | Multiplier |
| Bedrooms | | | | | | | | | |
| 3 | | 2746.00 | | 8238.0 | 40.0 | 0.90 | 3 | 1.00 | 2684.98 |
| | | | | | As-Built Total: | | | | 8054.9 |

| CODE COMPLIANCE STATUS | | | | | | | |
|------------------------|---|---------|---|-----------|---|--------|--|
| BASE | | | | AS-BUILT | | | |
| Cooling | + | Heating | + | Hot Water | = | Total | |
| Points | | Points | | Points | | Points | |
| 8424 | | 6959 | | 8238 | | 23621 | |

| | | | | | | | |
|---------|---|---------|---|-----------|---|--------|--|
| Cooling | + | Heating | + | Hot Water | = | Total | |
| Points | | Points | | Points | | Points | |
| 8151 | | 5738 | | 8055 | | 21944 | |

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* = 84.8

The higher the score, the more efficient the home.

DAVE SMITH, , , ,

1. New construction or existing New
2. Single family or multi-family Single family
3. Number of units, if multi-family 1
4. Number of Bedrooms 3
5. Is this a worst case? No
6. Conditioned floor area (ft²) 1560 ft²
7. Glass area & type Single Pane Double Pane
a. Clear - single pane 127.5 ft² 174.0 ft²
b. Clear - double pane 0.0 ft² 0.0 ft²
c. Tint/other SHGC - single pane 0.0 ft² 0.0 ft²
d. Tint/other SHGC - double pane
8. Floor types
a. Raised Wood, Post or Pier R=19.0, 1560.0ft²
b. N/A
c. N/A
9. Wall types
a. Frame, Wood, Exterior R=19.0, 1010.5 ft²
b. N/A
c. N/A
d. N/A
e. N/A
10. Ceiling types
a. Under Attic R=30.0, 1560.0 ft²
b. N/A
c. N/A
11. Ducts
a. Sup: Unc. Ret: Unc. AH: Interior Sup. R=6.0, 30.0 ft
b. N/A
12. Cooling systems
a. Central Unit Cap: 36.0 kBtu/hr SEER: 12.50
b. N/A
c. N/A
13. Heating systems
a. PTHP Cap: 36.0 kBtu/hr COP: 3.40
b. N/A
c. N/A
14. Hot water systems
a. Electric Resistance Cap: 40.0 gallons EF: 0.90
b. N/A
c. Conservation credits (HR-Heat recovery, Solar DHP-Dedicated heat pump)
15. HVAC credits CF,
(CF-Ceiling fan, CV-Cross ventilation, HF-Whole house fan, PT-Programmable Thermostat, MZ-C-Multizone cooling, MZ-H-Multizone heating)

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)

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name: **DAVE SMITH**
Address:
City, State:
Owner: **DAVE SMITH**
Climate Zone: **North**

Builder: **DAVE SMITH**
Permitting Office: **COLUMBIA COUNTY**
Permit Number: **22707**
Jurisdiction Number: **221000**

- | | | | | | |
|--|--------------------------------|-----------------------|--|-------------------|-----|
| 1. New construction or existing | New | ___ | 12. Cooling systems | | |
| 2. Single family or multi-family | Single family | ___ | a. Central Unit | Cap: 36.0 kBtu/hr | ___ |
| 3. Number of units, if multi-family | 1 | ___ | | SEER: 12.50 | ___ |
| 4. Number of Bedrooms | 3 | ___ | b. N/A | | ___ |
| 5. Is this a worst case? | No | ___ | c. N/A | | ___ |
| 6. Conditioned floor area (ft ²) | 1560 ft ² | ___ | 13. Heating systems | | |
| 7. Glass area & type | Single Pane | Double Pane | a. PTHP | Cap: 36.0 kBtu/hr | ___ |
| a. Clear glass, default U-factor | 127.5 ft ² | 174.0 ft ² | | COP: 3.40 | ___ |
| b. Default tint | 0.0 ft ² | 0.0 ft ² | b. N/A | | ___ |
| c. Labeled U or SHGC | 0.0 ft ² | 0.0 ft ² | c. N/A | | ___ |
| 8. Floor types | | | 14. Hot water systems | | |
| a. Raised Wood, Post or Pier | | ft ² | a. Electric Resistance | Cap: 40.0 gallons | ___ |
| b. N/A | | ___ | | EF: 0.90 | ___ |
| c. N/A | | ___ | b. N/A | | ___ |
| 9. Wall types | | | c. Conservation credits | | ___ |
| a. Frame, Wood, Exterior | R=19.0, 1010.5 ft ² | ___ | (HR-Heat recovery, Solar | | ___ |
| b. N/A | | ___ | DHP-Dedicated heat pump) | | ___ |
| c. N/A | | ___ | 15. HVAC credits | CF, ___ | ___ |
| 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, 1560.0 ft ² | ___ | MZ-C-Multizone cooling, | | ___ |
| b. N/A | | ___ | MZ-H-Multizone heating) | | ___ |
| c. N/A | | ___ | | | ___ |
| 11. Ducts | | | | | ___ |
| a. Sup: Unc. Ret: Unc. AH: Interior | Sup. R=6.0, 30.0 ft | ___ | | | ___ |
| b. N/A | | ___ | | | ___ |

Glass/Floor Area: 0.19

Total as-built points: 21944

Total base points: 23621

PASS

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

PREPARED BY: Larry Remonick A/c

DATE: 08-27-04 / 12-3-04

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

OWNER/AGENT: _____

DATE: _____

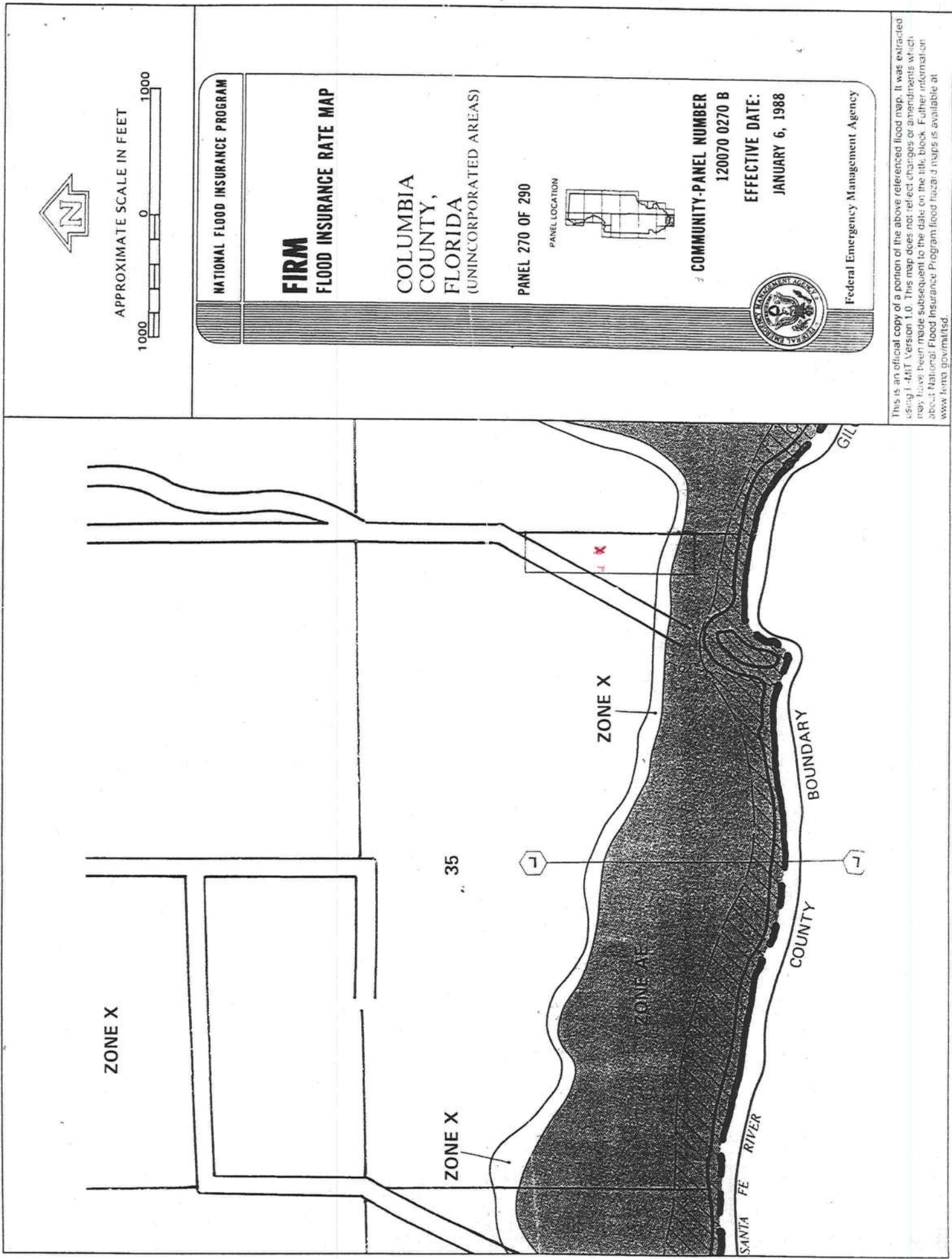
Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance with Section 553.908 Florida Statutes.



BUILDING OFFICIAL: _____

DATE: _____

0501-11



This is an official copy of a portion of the above referenced flood map. It was extracted using 1-441T Version 1.0. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. Further information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/nifmap.

Print Date: 12/16/03 (panel at scale and 1 up A)

COLUMBIA COUNTY 9-1-1 ADDRESSING

263 NW Lake City Ave. * P. O. Box 2949 * Lake City, FL 32056-2949
PHONE: (386) 752-8787 * 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 ISSUED: September 25, 2003

ENHANCED 9-1-1 ADDRESS:

1117 SW RUM ISLAND TER (FORT WHITE, FL 32038)

Addressed Location 911 Phone Number: NOT AVAIL.

OCCUPANT NAME: NOT AVAIL.

OCCUPANT CURRENT MAILING ADDRESS: _____

PROPERTY APPRAISER MAP SHEET NUMBER: 81

PROPERTY APPRAISER PARCEL NUMBER: 35-7S-16-04346-019

Other Contact Phone Number (If any): _____

Building Permit Number (If known): _____

Remarks: _____

Address Issued By: *Ron Croft*
Columbia County 9-1-1 Addressing Department

COLUMBIA COUNTY
9-1-1 ADDRESSING
APPROVED



PAYMENT FORM: Check 6850

PAYMENT DATE: June 23, 2003

RECIEVED FROM: Smith, Dave & Maryann

AMOUNT PAID: \$ 200.00

PAYING ON: 12-SC-04653 03-0602-N

PROPERTY LOCATION:

Lot: 5 Block: Rum Island Ranches
Property ID 35-7S-16-04346-019

| <u>EXPLANATION or DESCRIPTION:</u> | <u>FEE</u> |
|---|------------|
| Application for permitting of an onsite sewage treatment and disposal system, which includes application and plan review | \$ 25.00 |
| Site evaluation for a new system which includes an evaluation of criteria specified in rule 64E-6.004(3) | \$ 60.00 |
| Site evaluation for a system repair which includes an evaluation of criteria specified in rule 64E-6.015(1) | \$ 0.00 |
| Site re-evaluation, new or repair | \$ 0.00 |
| Permit for new system, including standard subsurface, filled or mounded system | \$ 55.00 |
| New system installation inspection | \$ 55.00 |
| Research fee to be collected in addition to and concurrent with the permit for a new system installation fee | \$ 5.00 |
| Repair permit issuance, which includes inspection | \$ 0.00 |
| Inspection of a system previously in use | \$ 0.00 |
| Reinspection fee per visit for site inspections after system construction approval or Installation reinspection for non-compliant system per each visit | \$ 0.00 |
| System abandonment permit, includes permit issuance and inspection | \$ 0.00 |
| Variance application for a single-family residence per each lot or building site | \$ 0.00 |
| Variance application for a multi-family residence or commercial building per each building site | \$ 0.00 |

RECEIVED BY: MMB

AUDIT CONTROL NO. S030623001

DISCLOSURE STATEMENT

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

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

TYPE OF CONSTRUCTION

- ☒ Single Family Dwelling
☐ Farm Outbuilding
☐ New Construction

- ☐ Two-Family Residence
☐ Other _____

☐ Addition, Alteration, Modification or other Improvement

NEW CONSTRUCTION OR IMPROVEMENT

I DAVE + MARYANN Smith, 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 ss.489.103(7) allowing this exception for the construction permitted by Columbia County Building Permit Number _____

Dave Smith
Signature

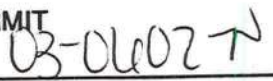
1-4-05
Date

FOR BUILDING USE ONLY

I hereby certify that the above listed owner/builder has been notified of the disclosure statement in Florida Statutes ss 489.103(7).

Date 1-4-05 Building Official/Representative

Daniel K. Kline



NOTICE OF COMMENCEMENT FORM
COLUMBIA COUNTY, FLORIDA

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

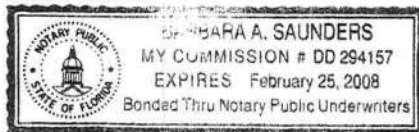
Tax Parcel ID Number 04346-019

1. Description of property: (legal description of the property and street address or 911 address)
TRACT of land situated in Section 35, Township 7 South, Range 16 East, Columbia County, Florida, said tract of land being known as TRACT 5 of RUM ISLAND Ranches an Unrecorded Subdivision
2. General description of improvement: single family dwelling
3. Owner Name & Address DAVE + MARYANN SMITH 1117 SW RUM Island Ter. Ft. White FL 32038 Interest in Property owners
4. Name & Address of Fee Simple Owner (if other than owner): —
5. Contractor Name self Phone Number —
Address —
6. Surety Holders Name — Phone Number —
Address —
Amount of Bond — Inst: 2005000156 Date: 01/04/2005 Time: 13:23
DC, P. DeWitt Cason, Columbia County B: 1034 P: 2191
7. Lender Name —
Address —
8. Persons within the State of Florida designated by the Owner upon whom notices or other documents may be served as provided by section 718.13 (1)(a) 7; Florida Statutes:
Name — Phone Number —
Address —
9. In addition to himself/herself the owner designates — of —
to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) –
(a) 7. Phone Number of the designee —
10. Expiration date of the Notice of Commencement (the expiration date is 1 (one) year from the date of recording, (Unless a different date is specified) —

NOTICE AS PER CHAPTER 713, Florida Statutes:

The owner must sign the notice of commencement and no one else may be permitted to sign in his/her stead.

David M. Smith
Signature of Owner



Sworn to (or affirmed) and subscribed before
day of January 4, 2005

NOTARY STAMP/SEAL

Barbara C. Saunders
Signature of Notary

FDL 247-0
Exp. 2009

COLUMBIA COUNTY FLORIDA DEPARTMENT OF BUILDING AND ZONING

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 35-7S-16-04346-019

Building permit No. 000022707

Use Classification SFD, UTILITY

Fire: 0.00

Permit Holder OWNER BUILDER

Waste: 0.00

Owner of Building MARY-ANN & DAVE SMITH

Total: 0.00

Location: 1117 SW RUM ISLAND TERRACE, FT. WHITE, FL

Date: 07/25/2006

Harry Dickel

Building Inspector



POST IN A CONSPICUOUS PLACE
(Business Places Only)