

DATE 03/05/2010

**Columbia County Building Permit**  
This Permit Must Be Prominently Posted on Premises During Construction**PERMIT**  
**000028401**

APPLICANT KIMMY EDGLEY PHONE 386.752.0580  
ADDRESS 590 SW ARLINGTON BLVD., STE. 113 LAKE CITY FL 32055  
OWNER VERNON H.(JR.) & LORI BERRY PHONE 386.961.8395  
ADDRESS 949 SW MARCI TERRACE LAKE CITY FL 32024  
CONTRACTOR DOUG EDGLEY PHONE 386.752.0580  
LOCATION OF PROPERTY 90-W TO C-252, TL TO JAFUS ALLEN, TL TO BRIMM, TR TO MARCIS  
TERRACE, TL & ITS 3/4 OF A MILE ON L.  
TYPE DEVELOPMENT SFD/UTILITY ESTIMATED COST OF CONSTRUCTION 171850.00  
HEATED FLOOR AREA 2192.00 TOTAL AREA 3437.00 HEIGHT 23.60 STORIES 1  
FOUNDATION CONC WALLS FRAMED ROOF PITCH 8'12 FLOOR CONC  
LAND USE & ZONING A-3 MAX. HEIGHT 35  
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 13-4S-15-00355-003 SUBDIVISION \_\_\_\_\_  
LOT \_\_\_\_\_ BLOCK \_\_\_\_\_ PHASE \_\_\_\_\_ UNIT \_\_\_\_\_ TOTAL ACRES 10.00

R282811326  
Culvert Permit No. \_\_\_\_\_ Culvert Waiver \_\_\_\_\_ Contractor's License Number 1767 Applicant/Owner/Contractor  
EXISTING 10-0092 BLK HD N  
Driveway Connection \_\_\_\_\_ Septic Tank Number \_\_\_\_\_ LU & Zoning checked by \_\_\_\_\_ Approved for Issuance \_\_\_\_\_ New Resident

COMMENTS: 1 FOOT ABOVE ROAD. PROPOSED PROPERTY APPRAISER PARCEL NUMBER.

NOC ON FILE.

Check # or Cash 1767**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 \$ 860.00 CERTIFICATION FEE \$ 17.18 SURCHARGE FEE \$ 17.18  
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 \$ \_\_\_\_\_ **TOTAL FEE** 969.36  
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. 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."

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.**



# 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.

#28401

## 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. JB109476 Company Phone No. 386-755-3611  
FHA/VA Case No. (if any) \_\_\_\_\_

## Section 2: Builder Information

Company Name Edgley Construction Phone No. 752-0580

## Section 3: Property Information

Location of Structure(s) Treated (Street Address or Legal Description, City, State and Zip) Vernon & Lori Benny  
949 SW Marcus Terr.  
Lake City, FL 32024

## Section 4: Service Information

Date(s) of Service(s) 4/5/10  
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: Pro Thor EPA Registration No. 83923-4  
Approx. Dilution (%): 0.05% Approx. Total Gallons Mix Applied: 795 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) S. Gregory Certification No. (if required by State law) JB104376

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 [Signature] Date 4/5/10

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

Form NPCA-99-B may still be used

form HUD-NPMA-99-B

Reorder Product #2581 From • CROWNMAX • 1-800-252-4011



**COLUMBIA COUNTY**  
**FLORIDA**

# OCCUPANCY

**COLUMBIA COUNTY, FLORIDA**

## Department of Building and Zoning Inspection

*This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.*

Parcel Number 13-4S-15-00355-003

Building permit No. 000028401

Use Classification SFD/UTILITY

Fire: 134.42

Permit Holder DOUG EDGLEY

Waste: 184.25

Owner of Building VERNON H.(JR.) & LORI BERRY

Total: 318.67

Location: 949 SW MARCIS TERR, LAKE CITY, FL 32024

Date: 11/16/2010

CORRECTED ADDRESS  
THIS DATE. ORIGINAL  
DONE 11/02/2010

**POST IN A CONSPICUOUS PLACE**  
*(Business Places Only)*

Building Inspector



*Handwritten signature*

# COLUMBIA COUNTY OFFICE OF CIVIL ENGINEERING

## OCCUPANCY

COLUMBIA COUNTY, FLORIDA

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Total: 318.67

Location: 949 SW MARCI TERR, LAKE CITY, FL 32024

Date: 11/02/2010

*Ray Lee*



Building Inspector

POST IN A CONSPICUOUS PLACE  
(Business Places Only)



**Columbia County Building Permit Application**

**VF SUBCONTRACTOR**

SIXES ☒ DEAR ☒  
NICHOLSON ☒ TAYLOR ☒

**For Office Use Only** Application # 1002-92 Date Received 2/26 By JW Permit # 28401  
 Zoning Official BWK Date 03.03.10 Flood Zone X Land Use A-3 Zoning A-3  
 FEMA Map # N/A Elevation N/A MFE 18' above H River N/A Plans Examiner HO Date 2-5-10  
 Comments \_\_\_\_\_  
☒ NOC ☐ EH ☐ Deed or PA ☐ Site Plan ☐ State Road Info ☐ Parent Parcel # \_\_\_\_\_  
☐ Dev Permit # \_\_\_\_\_ ☐ In Floodway ☒ Letter of Auth. from Contractor ☐ F W Comp. letter \_\_\_\_\_  
 IMPACT FEES: EMS \_\_\_\_\_ Fire \_\_\_\_\_ Corr on file Road/Code \_\_\_\_\_  
 School \_\_\_\_\_ = TOTAL Suspended

Septic Permit No. 10-0092 Fax 386-752-4904  
 Name Authorized Person Signing Permit KIMMY EDGLEY Phone 386-752-0580  
 Address 590 SW ARLINGTON BLVD SUITE 113 LAKE CITY FL 32025  
 Owners Name VERNON H. JR & LORI G BERRY Phone 386-752-0580  
 911 Address 949 SW MARCIS TERRACE LAKE CITY FL 32024  
 Contractors Name EDGLEY CONSTRUCTION CO DIV OF CEE BAS INC Phone 386-752-0580  
DOUGLAS EDGLEY  
 Address 590 SW ARLINGTON BLVD SUITE 113 LAKE CITY FL 32025  
 Fee Simple Owner Name & Address VERNON & LORI BERRY  
 Bonding Co. Name & Address N/A  
 Architect/Engineer Name & Address MARK DISOSWAY, P.E. P.O. BOX 868 LAKE CITY FL 32056  
 Mortgage Lenders Name & Address FFSB P.O. BOX 2029 LAKE CITY FL 32056  
 Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress Energy  
proposed Appraisers #  
 Property ID Number 13-4S-15-00355-003 Estimated Cost of Construction \$260,000.00  
 Subdivision Name N/A Lot \_\_\_\_\_ Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase \_\_\_\_\_  
 Driving Directions 90 W TL ON CR 252 TL ON JAFUS-ALLEN RD, TR ON BRIMM, TL ON  
MARCIS TERR 3/4 MILES ON LEFT

Number of Existing Dwellings on Property N/A  
 Construction of RESIDENTIAL HOME Total Acreage 10 Lot Size \_\_\_\_\_  
 Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 23'6"  
 Actual Distance of Structure from Property Lines - Front 175.7 Side 59' Side 520.22' Rear 423.75'  
 Number of Stories 1 Heated Floor Area 2192 Total Floor Area 3437 Roof Pitch 8/12

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.

*JW spoke to Kimmy 3-5-10  
 JW left message w/ Peggy 4: Kimmy 3-5-10*



# 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. It may be to your advantage to check and see if your property is encumbered by any restrictions.

*Venera Bey*  
Owners Signature

(Owners Must Sign All Applications Before Permit Issuance.)

**\*\*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.

*Douglas L. Luff*  
Contractor's Signature (Permitee)

Contractor's License Number RR282811326  
Columbia County  
Competency Card Number 44

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 26 day of February 2010.

Personally known ☒ or Produced Identification ☐

*Nanci Brinkley*  
State of Florida Notary Signature (For the Contractor)

SEAL:





1002-42  
Rec. 18.50 Berry  
Conf. Copy 3.50

THIS INSTRUMENT WAS PREPARED BY:  
FIRST FEDERAL BANK OF FLORIDA  
4705 WEST U.S. HIGHWAY 90  
P.O. BOX 2029  
LAKE CITY, FLORIDA 32066

PERMIT NO. \_\_\_\_\_

TAX FOLIO NO. Part of 13-48-15-00355-001

NOTICE OF COMMENCEMENT

STATE OF FLORIDA  
COUNTY OF COLUMBIA

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.

1. Description of property: That part of Section 13, Township 4 South, Range 15 East, Columbia County, Florida, as described on Exhibit "A" attached hereto.
2. General description of improvement: Construction of Dwelling
3. Owner information:  
a. Name and address: VERNON H. BERRY, JR. and LORI G. BERRY, husband and wife,  
431 NW Hillsboro Street, Lake City, FL 32025  
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): CEE-BAS, INC., 590 SW Arlington Blvd., Suite  
105, Lake City, FL 32025  
b. Contractor's phone number: 386-752-0580
5. Surety:  
a. Name and address: None  
b. Phone Number: \_\_\_\_\_  
c. Amount of bond: \_\_\_\_\_

6. Lender: FIRST FEDERAL BANK OF FLORIDA  
4705 WEST U.S. HIGHWAY 90  
P. O. BOX 2029  
LAKE CITY, FLORIDA 32066  
(386) 752-0600

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

8. In addition to himself, Owner designates PAULA HACKETT of FIRST FEDERAL BANK OF FLORIDA, 4705 West U.S. Highway 90/P.O. Box 2029, Lake City, Florida 32066 to receive a copy of the Lender'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 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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Vernon H. Berry, Jr.  
Signature of Owner or Owner's Authorized  
Officer/Director/Partner/Manager  
Vernon H. Berry, Jr.  
Lori G. Berry  
Signature of Spouse

BERRY, The foregoing instrument was acknowledged before me this 1st day of March, 2010, by VERNON H. BERRY, JR. & LORI G. BERRY, (name of person) as OWNERS (type of authority, e.g. officer, trustee, attorney in fact) for (name of party on behalf of whom instrument was executed).

Terry McDavid  
Signature of Notary Public - State of Florida  
Print, Type, or Stamp Commission Name  
Public Commission Number: \_\_\_\_\_  
Personally Known \_\_\_\_\_  
Identification \_\_\_\_\_  
TERRY MCDAVID  
MY COMMISSION # DD 884108  
EXPIRES: January 16, 2014  
Bonded This Notary Public Underwrites

Verification Pursuant to Section 82.525, 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.

Vernon H. Berry, Jr.  
Signature of Natural Person Signer/Agent  
Vernon H. Berry, Jr.  
Lori G. Berry

Inst. # 201012003150 Date 3/3/2010 Time 8:17 AM  
P.O. Box 2029, Lake City, Columbia County Page 1 of 2 B:1189 P:2575



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

Sy: Bernie Don  
Deputy Clerk  
Date: March 3, 2010



EXHIBIT "A"

THE SOUTH 1/2 OF THE NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4 OF SECTION 13, TOWNSHIP 4 SOUTH, RANGE 15 EAST, COLUMBIA COUNTY, FLORIDA, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGIN AT THE SOUTHWEST CORNER OF THE NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4 OF SAID SECTION 13 AND RUN NORTH 00 DEG. 58 MIN. 14 SEC. WEST, ALONG THE WEST LINE OF SAID NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4, 331.35 FEET; THENCE NORTH 88 DEG. 36 MIN. 26 SEC. EAST, 657.20 FEET TO THE EAST LINE OF SAID NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4; THENCE SOUTH 00 DEG. 57 MIN. 43 SEC. EAST, 331.12 FEET TO THE SOUTHEAST CORNER OF THE NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4; THENCE SOUTH 88 DEG. 35 MIN. 14 SEC. WEST, ALONG THE SOUTH LINE OF THE SAID NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4, 657.15 FEET TO THE POINT OF BEGINNING.



# **HALL'S PUMP & WELL SERVICE, INC.**

SPECIALIZING IN 4"-6" WELLS



DONALD AND MARY HALL  
OWNERS

PHONE (386) 752-1854  
FAX (386) 755-7022  
904 NW MAIN BLVD.  
LAKE CITY, FLORIDA 32056

**August 12, 2009**

**Notice to All Contractors:**

**Re: 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,**

**Donald D. Hall**



Rec. 27.00  
Doc. .70

Inst: 201012002100 Date: 2/4/2010 Time: 8:08 AM  
Doc Stamp: Dead, 0.70  
Doc: D.C. F. Dennis Gerson, Colusa County Page 7 of 3 51768 1-1/2/04

\*"Grantor" and "grantee" are used for singular or plural, as context requires.

IN WITNESS WHEREOF, grantor has hereunto set grantor's hand  
and seal the day and year first above written.

Signed, sealed and delivered  
in our presence:

DeEtte F. Brown  
(First witness)  
DeEtte F. Brown  
Printed Name  
Myrtle Ann McElroy  
(Second witness)  
Myrtle Ann McElroy  
Printed Name

Connie D. Bennett (SEAL)  
Connie D. Bennett

Ronald P. Bennett (SEAL)  
Ronald P. Bennett

STATE OF FLORIDA  
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 11th  
day of February 2010, by CONNIE D. BENNETT and her husband, RONALD  
P. BENNETT. They are personally known to me and did not take an  
oath.

Myrtle Ann McElroy  
Notary Public  
My Commission Expires:





EXHIBIT "A"

PARCEL A:

THE NORTH 1/2 OF THE NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4 OF SECTION 13, TOWNSHIP 4 SOUTH, RANGE 15 EAST, COLUMBIA COUNTY, FLORIDA, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGIN AT THE NORTHWEST CORNER OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4 OF SAID SECTION 13 AND RUN NORTH 88 DEG. 37 MIN. 38 SEC. EAST, ALONG THE NORTH LINE OF SAID NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4, 657.25 FEET TO THE NORTHEAST CORNER OF SAID NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4; THENCE SOUTH 00 DEG. 57 MIN. 43 SEC. EAST, ALONG THE EAST LINE OF SAID NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4, 331.12 FEET; THENCE SOUTH 88 DEG. 36 MIN. 26 SEC. WEST, 657.20 FEET TO THE WEST LINE OF SAID NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4; THENCE NORTH 00 DEG. 58 MIN. 14 SEC. WEST, ALONG SAID WEST LINE, 331.35 FEET TO THE POINT OF BEGINNING.

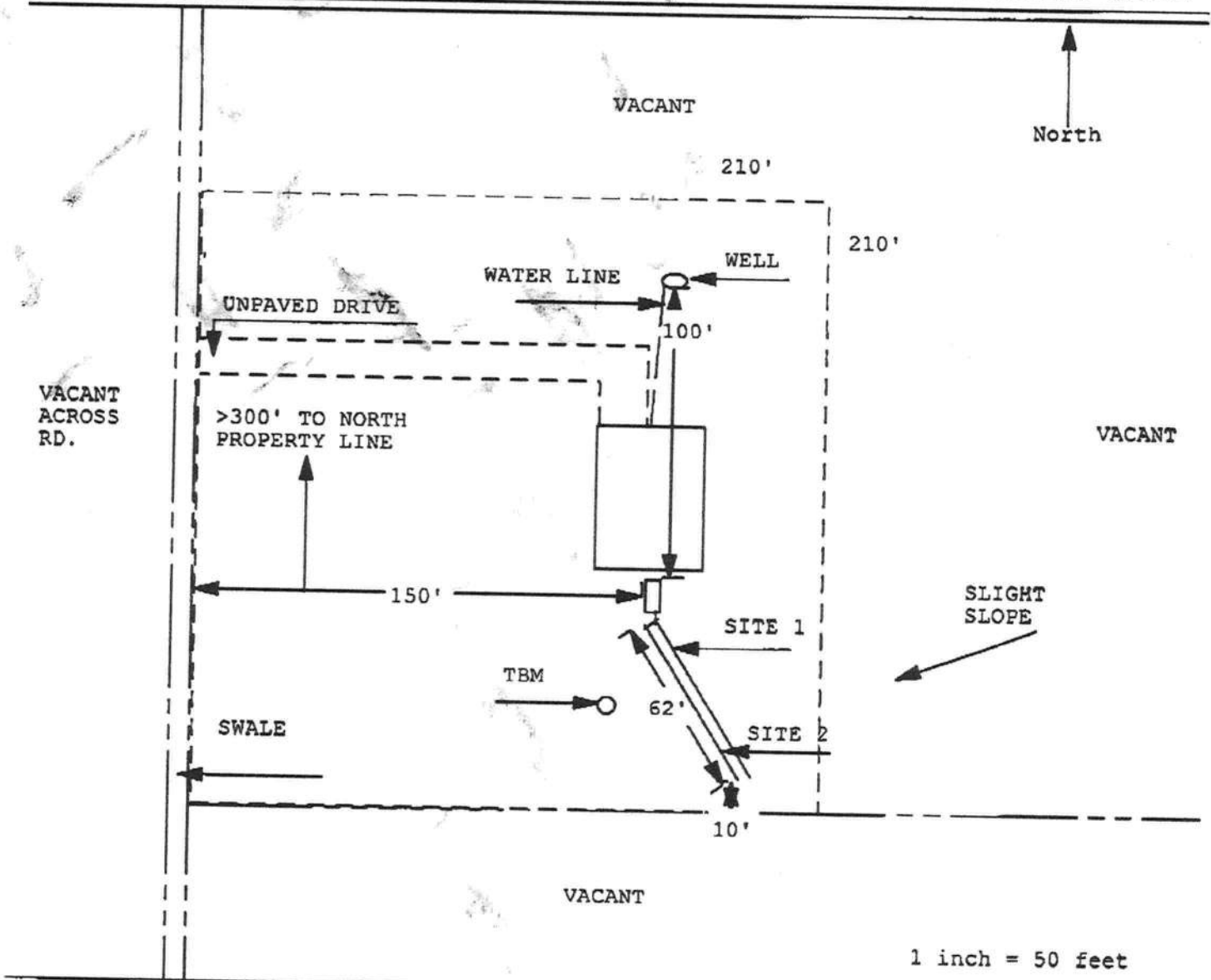
PARCEL B:

THE SOUTH 1/2 OF THE NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4 OF SECTION 13, TOWNSHIP 4 SOUTH, RANGE 15 EAST, COLUMBIA COUNTY, FLORIDA, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

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Application for Onsite Sewage Disposal System  
Construction Permit. Part II Site Plan  
Permit Application Number: 10-0092

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Paul R. Relyea Date 2/18/10  
Plan Approved X Not Approved        Date       

By Salhi Lord, PH Director CPHU 2-25-10  
Notes: See attached for full view  
Columbia CHD





# PRODUCT APPROVAL SPECIFICATION SHEET

**Location:** \_\_\_\_\_

**Project Name:** VERNON & LORI BERRY

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](http://www.floridabuilding.org)


Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
<b>A. EXTERIOR DOORS</b>			
1. Swinging	MASONITE	EXTERIOR DOORS	FL4334-R4
2. Sliding	MI HOME PRO	SLIDING GLASS DOORS	FL11956-R1
3. Sectional			
4. Roll up			
5. Automatic			
6. Other			
<b>B. WINDOWS</b>			
1. Single hung	ATRIUM	INSULATED WINDOWS	FL 6752-2
2. Horizontal Slider	ATRIUM	INSULATED WINDOWS	FL 7836-1
3. Casement	ATRIUM	INSULATED WINDOWS	FL 8716
4. Double Hung			
5. Fixed	ATRIUM	INSULATED WINDOWS	FL 7834-1
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11 Dual Action			
12. Other			
<b>C. PANEL WALL</b>			
1. Siding	CERTAINTED		FL12483
2. Soffits	CERTAINTED		FL13389
3. EIFS			
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block	PITTSBURGH CORNING	GLASS BLOCK	FL 1363-R4
8. Membrane			
9. Greenhouse			
10. Other			
<b>D. ROOFING PRODUCTS</b>			
1. Asphalt Shingles	CERTAINTED	ARCH SHINGLES	FL 5444-R2
2. Underlayments	WOODLAND		FL 1814-R4
3. Roofing Fasteners			
4. Non-structural Metal Rf			
5. Built-Up Roofing			
6. Modified Bitumen	CERTAINTED		FL 2533-R3
7. Single Ply Roofing Sys			
8. Roofing Tiles			
9. Roofing Insulation			
10. Waterproofing			
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	CERTAINTeed	ADHESIVE (BULL)	FL 490-R2
15. Roof Tile Adhesive			
16. Spray Applied Polyurethane Roof			
17. Other			
<b>E. SHUTTERS</b>			
1. Accordion			
2. Bahama			
3. Storm Panels			
4. Colonial			
5. Roll-up			
6. Equipment			
7. Others			
<b>F. SKYLIGHTS</b>			
1. Skylight	VELOX	SKYLIGHTS	FL 451-R4
2. Other			
<b>G. STRUCTURAL COMPONENTS</b>			
1. Wood connector/anchor	SIMPSON	ANCHORS	FL 2355-R3
2. Truss plates	SIMPSON		FL 10655
3. Engineered lumber	WEYHAUSER	ENGINEERED LUMBER	FL 1630-R5
4. Railing			
5. Coolers-freezers			
6. Concrete Admixtures			
7. Material			
8. Insulation Forms			
9. Plastics			
10. Deck-Roof			
11. Wall			
12. Sheds			
13. Other			
<b>H. NEW EXTERIOR ENVELOPE PRODUCTS</b>			
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.

  
Contractor or Contractor's Authorized Agent Signature

DOUGLAS E EDGLEY 2-26-10  
Print Name Date

Permit # (FOR STAFF USE ONLY)

## SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1006-92 CONTRACTOR Edgley Construction PHONE 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.**

<b>ELECTRICAL</b> ✓	Print Name <u>Donald K. Hollingsworth</u> License #: <u>13012322</u>	Signature <u>[Signature]</u> Phone #: <u>386-755-8944</u>
<b>MECHANICAL/A/C</b> ✓	Print Name <u>LAMAR BOOZER</u> License #: <u>PA0035027</u>	Signature <u>[Signature]</u> Phone #: <u>386-752-6700</u>
<b>PLUMBING/GAS</b> ✓	Print Name <u>MARK BAZZS</u> License #: <u>CFCO 57219</u>	Signature <u>[Signature]</u> Phone #: <u>386-752-8656</u>
<b>ROOFING</b> ✓	Print Name <u>Darin L. Summerlin</u> License #: <u>CCC326192</u>	Signature <u>[Signature]</u> Phone #: <u>386-288-5426</u>
<b>SHEET METAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>FIRE SYSTEM/SPRINKLER</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SOLAR</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
✓ MASON	000095	Allen London SR	Allen London SR
CONCRETE FINISHER			
✓ FRAMING	CBC 022354	William J. Kucsek	William J. Kucsek
✓ INSULATION	000240	Will Sikes	Will Sikes
STUCCO		NA	
✓ DRYWALL	000621	JESSE AMBROS	Jesse Ambros
PLASTER			
✓ CABINET INSTALLER	000843	Craig Nicholson	Craig Nicholson
✓ PAINTING	000632	JOHN M BISPHAM	John M Bispham
ACOUSTICAL CEILING			
GLASS			
✓ CERAMIC TILE	000214	JAMES L RIX JR	JAMES L RIX JR
FLOOR COVERING			
✓ ALUM/VINYL SIDING	0000164	MICHAEL R. NICHOLSON	MICHAEL R. NICHOLSON
✓ GARAGE DOOR	CBC1256116	LAMAR BEAR	LAMAR BEAR
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.



# SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1002-42 CONTRACTOR DOUG EDGIE PHONE 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.

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<b>ELECTRICAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>MECHANICAL/ A/C</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>PLUMBING/ GAS</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>ROOFING</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SHEET METAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>FIRE SYSTEM/ SPRINKLER</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SOLAR</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
✓ PLASTER	000256	BEN DAVID PLASTERING LLC	Ben David
✓ CABINET INSTALLER	000762	Bordeaux Cabinets Inc.	Steve Bordeaux
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 NUMBER 1002-42 CONTRACTOR EUGENE PHONE 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.**

<b>ELECTRICAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>MECHANICAL/ A/C _____</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>PLUMBING/ GAS</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>ROOFING</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SHEET METAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>FIRE SYSTEM/ SPRINKLER</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SOLAR</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
✓ CONCRETE FINISHER	BC1252683	James H Norton II	James H Norton II updated
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
✓ GLASS	000618	Carl Bullard Jr	Carl Bullard Jr
✓ CERAMIC TILE	000654	Mark L. Taylor	Mark L. Taylor
✓ FLOOR COVERING	000655	Mark L. Taylor	Mark L. Taylor
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.



**FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION**

Florida Department of Community Affairs Residential Performance Method A

Project Name: 912051Vernon&LoriBerryRes  
 Street:  
 City, State, Zip: , FL ,  
 Owner: Vernon & Lori Berry  
 Design Location: FL, Gainesville

Builder Name: SOULS EDO G L E Y  
 Permit Office: COLUMBIA  
 Permit Number: 28401  
 Jurisdiction: 22100 C

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 (ft <sup>2</sup> )	2192	
7. Windows	Description	Area
a. U-Factor:	Dbl, U=0.40	277.33 ft <sup>2</sup>
SHGC:	SHGC=0.40	
b. U-Factor:	N/A	ft <sup>2</sup>
SHGC:		
c. U-Factor:	N/A	ft <sup>2</sup>
SHGC:		
d. U-Factor:	N/A	ft <sup>2</sup>
SHGC:		
e. U-Factor:	N/A	ft <sup>2</sup>
SHGC:		
8. Floor Types	Insulation	Area
a. Slab-On-Grade Edge Insulation	R=0.0	2192.00 ft <sup>2</sup>
b. N/A	R=	ft <sup>2</sup>
c. N/A	R=	ft <sup>2</sup>

9. Wall Types	Insulation	Area
a. Frame - Wood, Exterior	R=13.0	1843.50 ft <sup>2</sup>
b. Frame - Wood, Adjacent	R=13.0	300.00 ft <sup>2</sup>
c. N/A	R=	ft <sup>2</sup>
d. N/A	R=	ft <sup>2</sup>
10. Ceiling Types	Insulation	Area
a. Under Attic (Vented)	R=30.0	2228.00 ft <sup>2</sup>
b. N/A	R=	ft <sup>2</sup>
c. N/A	R=	ft <sup>2</sup>
11. Ducts		
a. Sup: Attic Ret: Attic AH: Interior Sup. R= 6,	565 ft <sup>2</sup>	
12. Cooling systems		
a. Central Unit	Cap: 38.0 kBtu/hr	
	SEER: 13	
13. Heating systems		
a. Electric Heat Pump	Cap: 38.0 kBtu/hr	
	HSPF: 7.7	
14. Hot water systems		
a. Electric	Cap: 40 gallons	
	EF: 0.93	
b. Conservation features		
None		
15. Credits	None	

Glass/Floor Area: 0.127

Total As-Built Modified Loads: 36.07

Total Baseline Loads: 44.59

**PASS**

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

PREPARED BY:

DATE: 12/18/09 EVAN BORMSTER

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: \_\_\_\_\_

## PROJECT

Title: 912051Vernon&LoriBerryRes	Bedrooms: 3	Adress Type: Street Address
Building Type: FLAsBuilt	Bathrooms: 0	Lot #
Owner: Vernon & Lori Berry	Conditioned Area: 2192	SubDivision:
# of Units: 1	Total Stories: 1	PlatBook:
Builder Name:	Worst Case: Yes	Street:
Permit Office:	Rotate Angle: 315	County: Columbia
Jurisdiction:	Cross Ventilation: No	City, State, Zip: , FL ,
Family Type: Single-family	Whole House Fan: No	
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	75	70	1305.5	51	Medium

## FLOORS

✓	#	Floor Type	Perimeter	R-Value	Area	Tile	Wood	Carpet
_____	1	Slab-On-Grade Edge Insulatio	238 ft	0	2192 ft²	0.3	0.3	0.4

## ROOF

✓	#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	Tested	Deck Insul.	Pitch
_____	1	Gable or shed	Composition shingles	2635 ft²	730 ft²	Dark	0.96	No	0	33.7 deg

## ATTIC

✓	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
_____	1	Full attic	Vented	303	2192 ft²	N	N

## CEILING

✓	#	Ceiling Type	R-Value	Area	Framing Frac	Truss Type
_____	1	Under Attic (Vented)	30	2228 ft²	0.11	Wood

## WALLS

✓	#	Ornt	Adjacent To	Wall Type	Cavity R-Value	Area	Sheathing R-Value	Framing Fraction	Solar Absor.
_____	1	N	Exterior	Frame - Wood	13	654 ft²	0	0.23	0.75
_____	2	S	Exterior	Frame - Wood	13	438 ft²	0	0.23	0.75
_____	3	E	Exterior	Frame - Wood	13	436.5 ft²	0	0.23	0.75
_____	4	W	Exterior	Frame - Wood	13	277.5 ft²	0	0.23	0.75
_____	5	NE	Exterior	Frame - Wood	13	37.5 ft²	0	0.23	0.75
_____	6	??	Garage	Frame - Wood	13	300 ft²		0.23	0.01

## DOORS

✓	#	Ornt	Door Type	Storms	U-Value	Area
✓	1	NE	Insulated	None	0.4	10 ft²
✓	2	S	Insulated	None	0.4	20 ft²
✓	3	??	Insulated	None	0.4	20 ft²

## WINDOWS

Window orientation below is as entered. Actual orientation is modified by rotate angle shown in "Project" section above.

✓	#	Ornt	Frame	Panes	NFRC	U-Factor	SHGC	Storms	Area	Overhang		Int Shade	Screening
										Depth	Separation		
✓	1	N	Metal	Double (Clear)	Yes	0.4	0.4	N	3 ft²	0 ft 0 in	0 ft 0 in	HERS 2006	None
✓	2	N	Metal	Double (Clear)	Yes	0.4	0.4	N	45 ft²	0 ft 0 in	0 ft 0 in	HERS 2006	None
✓	3	N	Metal	Double (Clear)	Yes	0.4	0.4	N	20 ft²	0 ft 18 in	0 ft 30 in	HERS 2006	None
✓	4	N	Metal	Double (Clear)	Yes	0.4	0.4	N	20 ft²	0 ft 18 in	0 ft 30 in	HERS 2006	None
✓	5	NE	Metal	Double (Clear)	Yes	0.4	0.4	N	10 ft²	0 ft 160 in	0 ft 42 in	HERS 2006	None
✓	6	N	Metal	Double (Clear)	Yes	0.4	0.4	N	45 ft²	0 ft 114 in	0 ft 30 in	HERS 2006	None
✓	7	N	Metal	Double (Clear)	Yes	0.4	0.4	N	30 ft²	0 ft 94 in	0 ft 30 in	HERS 2006	None
✓	8	E	Metal	Double (Clear)	Yes	0.4	0.4	N	3 ft²	0 ft 0 in	0 ft 0 in	HERS 2006	None
✓	9	S	Metal	Double (Clear)	Yes	0.4	0.4	N	60 ft²	0 ft 114 in	0 ft 30 in	HERS 2006	None
✓	10	S	Metal	Double (Clear)	Yes	0.4	0.4	N	13.33 ft²	0 ft 114 in	0 ft 34 in	HERS 2006	None
✓	11	S	Metal	Double (Clear)	Yes	0.4	0.4	N	9 ft²	0 ft 18 in	0 ft 30 in	HERS 2006	None
✓	12	W	Metal	Double (Clear)	Yes	0.4	0.4	N	16 ft²	0 ft 18 in	0 ft 30 in	HERS 2006	None
✓	13	W	Metal	Double (Clear)	Yes	0.4	0.4	N	3 ft²	0 ft 18 in	0 ft 30 in	HERS 2006	None

## INFILTRATION & VENTING

✓	Method	SLA	CFM 50	ACH 50	ELA	EqLA	--- Forced Ventilation ---		Run Time	Fan
							Supply CFM	Exhaust CFM	Fraction	Watts
✓	Default	0.00036	2070	6.30	113.6	213.7	0 cfm	0 cfm	0	0

## GARAGE

✓	#	Floor Area	Ceiling Area	Exposed Wall Perimeter	Avg. Wall Height	Exposed Wall Insulation
✓	1	578.0000016 ft²	578.0000016 ft²	63 ft	9 ft	(invalid)

## COOLING SYSTEM

✓	#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Ductless
✓	1	Central Unit	None	SEER: 13	38 kBtu/hr	1140 cfm	0.75	

## HEATING SYSTEM

✓	#	System Type	Subtype	Efficiency	Capacity	Ductless
✓	1	Electric Heat Pump	None	HSPF: 7.7	38 kBtu/hr	



HOT WATER SYSTEM												
✓	#	System Type	EF	Cap	Use	SetPnt	Conservation					
_____	1	Electric	0.93	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 ----			---- Return ----		Leakage Type	Air Handler	CFM 25	Percent Leakage	QN	RLF
		Location	R-Value	Area	Location	Area						
_____	1	Attic	6	565 ft²	Attic	20 ft²	Default Leakage	Interior				

TEMPERATURES													
Programable Thermostat: N				Ceiling Fans:									
Cooling	<input checked="" type="checkbox"/> Jan	<input checked="" type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input checked="" type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input checked="" type="checkbox"/> Oct	<input checked="" 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 checked="" type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input checked="" 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 checked="" type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input checked="" 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	78	78	78	78
	PM	78	78	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	68	68	68	68	68	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	68	68
Heating (WEH)	AM	68	68	68	68	68	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	68	68

# Code Compliance Checklist

## Residential Whole Building Performance Method A - Details

ADDRESS:

, FL,

PERMIT #:

**INFILTRATION REDUCTION COMPLIANCE CHECKLIST**

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	N1106.AB.1.1	Maximum: .3 cfm/sq.ft. window area; .5 cfm/sq.ft. door area.	
Exterior & Adjacent Walls	N1106.AB.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	N1106.AB.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	N1106.AB.1.2.3	Between walls & ceilings; penetrations of ceiling plane to 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	N1106.AB.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 with < 2.0 cfm from conditioned space, tested.	
Multi-story Houses	N1106.AB.1.2.5	Air barrier on perimeter of floor cavity between floors.	
Additional Infiltration reqts	N1106.AB.1.3	Exhaust fans vented to outdoors, dampers; combustion space heaters comply with NFPA, have combustion air.	

**OTHER PRESCRIPTIVE MEASURES (must be met or exceeded by all residences.)**

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	N1112.AB.3	Comply with efficiency requirements in Table N112.ABC.3. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required.	
Swimming Pools & Spas	N1112.AB.2.3	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%. Heat pump pool heaters shall have a minimum COP of 4.0.	
Shower heads	N1112.AB.2.4	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG.	
Air Distribution Systems	N1110.AB	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated and installed in accordance with the criteria of Section N1110.AB. Ducts in unconditioned attics: R-6 min. insulation.	
HVAC Controls	N1107.AB.2	Separate readily accessible manual or automatic thermostat for each system.	
Insulation	N1104.AB.1 N1102.B.1.1	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 INDEX\* = 81

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

, , 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	1843.50 ft <sup>2</sup>
3. Number of units, if multiple family	1	b. Frame - Wood, Adjacent	R=13.0	300.00 ft <sup>2</sup>
4. Number of Bedrooms	3	c. N/A	R=	ft <sup>2</sup>
5. Is this a worst case?	Yes	d. N/A	R=	ft <sup>2</sup>
6. Conditioned floor area (ft <sup>2</sup> )	2192	10. Ceiling Types	Insulation	Area
7. Windows**	Description	a. Under Attic (Vented)	R=30.0	2228.00 ft <sup>2</sup>
a. U-Factor:	Dbl, U=0.40	b. N/A	R=	ft <sup>2</sup>
SHGC:	SHGC=0.40	c. N/A	R=	ft <sup>2</sup>
b. U-Factor:	N/A	11. Ducts		
SHGC:		a. Sup: Attic Ret: Attic AH: Interior Sup. R= 6, 565 ft <sup>2</sup>		
c. U-Factor:	N/A	12. Cooling systems		
SHGC:		a. Central Unit	Cap: 38.0 kBtu/hr	
d. U-Factor:	N/A		SEER: 13	
SHGC:		13. Heating systems		
e. U-Factor:	N/A	a. Electric Heat Pump	Cap: 38.0 kBtu/hr	
SHGC:			HSPF: 7.7	
8. Floor Types	Insulation	14. Hot water systems		
a. Slab-On-Grade Edge Insulation	R=0.0	a. Electric	Cap: 40 gallons	
b. N/A	R=		EF: 0.93	
c. N/A	R=	b. Conservation features		
		None		
		15. Credits		None

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 Index is only available through the EnergyGauge USA - FlaRes2008 computer program. This is not a Building Energy Rating. If your Index is below 100, your home may qualify for 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 [energygauge.com](http://energygauge.com) 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.

\*\*Label required by Section 13-104.4.5 of the Florida Building Code, Building, or Section B2.1.1 of Appendix G of the Florida Building Code, Residential, if not DEFAULT.





**COLUMBIA COUNTY BUILDING DEPARTMENT  
RESIDENTIAL CHECK LIST REQUIREMENTS**

**MINIMUM PLAN REQUIREMENTS FOR THE  
FLORIDA BUILDING CODE RESIDENTIAL 2007  
ONE (1) AND TWO (2) FAMILY DWELLINGS**

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

**ALL BUILDING PLANS MUST INDICATE COMPLIANCE with the Current 2007 FLORIDA BUILDING CODES RESIDENTIAL. ALL PLANS OR DRAWINGS SHALL PROVIDE CALCULATIONS AND DETAILS THAT HAVE THE SEAL AND SIGNATURE OF A CERTIFIED ARCHITECT OR ENGINEER REGISTERED IN THE STATE OF FLORIDA, OR ALTERNATE METHODOLOGIES, APPROVED BY THE STATE OF FLORIDA BUILDING COMMISSION FOR ONE-AND-TWO FAMILY DWELLINGS.**

**FOR DESIGN PURPOSES THE FOLLOWING BASIC WIND SPEEDS ARE PER FIGURE R301.2(4) of the FLORIDA BUILDING CODES RESIDENTIAL (Florida Wind speed map) SHALL BE USED.**

WIND SPEED LINE SHALL BE DEFINED AS FOLLOWS: THE CENTERLINE OF INTERSTATE 75.

ALL BUILDINGS CONSTRUCTED EAST OF SAID LINE SHALL BE ----- 100 MPH  
ALL BUILDINGS CONSTRUCTED WEST OF SAID LINE SHALL BE -----110 MPH  
NO AREA IN COLUMBIA COUNTY IS IN A WIND BORNE DEBRIS REGION

**GENERAL REQUIREMENTS:  
APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL**

Items to Include-  
Each Box shall be  
Circled as  
Applicable

			Yes	No	N/A
1	Two (2) complete sets of plans containing the following:		✓		
2	All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void		✓		
3	Condition space (Sq. Ft.) <b>2192</b>	Total (Sq. Ft.) under roof <b>3437</b>	IIIIIIII	IIIIIIII	IIII

Designers name and signature shall be on all documents and a licensed architect or engineer, signature and official embossed seal shall be affixed to the plans and documents as per the FLORIDA BUILDING CODES RESIDENTIAL R101.2.1

**Site Plan information including:**

4	Dimensions of lot or parcel of land	✓		
5	Dimensions of all building set backs	✓		
6	Location of all other structures (include square footage of structures) on parcel, existing or proposed well and septic tank and all utility easements.	✓		
7	Provide a full legal description of property. <b>warranty Deed</b>	✓		

## Wind-load Engineering Summary, calculations and any details required

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
8	Plans or specifications must show compliance with FBCR Chapter 3	IIIIII	IIII	IIIIII
		YES	NO	N/A
9	Basic wind speed (3-second gust), miles per hour <b>110 MPH</b>	✓		
10	(Wind exposure – if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated)	✓		
11	Wind importance factor and nature of occupancy	✓		
12	The applicable internal pressure coefficient, Components and Cladding	✓		
13	The design wind pressure in terms of psf (kN/m <sup>2</sup> ), to be used for the design of exterior component, cladding materials not specifically designed by the registered design professional.	✓		

## Elevations Drawing including:

14	All side views of the structure	✓		
15	Roof pitch	✓		
16	Overhang dimensions and detail with attic ventilation	✓		
17	Location, size and height above roof of chimneys <b>non-vented</b>			✓
18	Location and size of skylights with Florida Product Approval			✓
18	Number of stories	✓		
20A	Building height from the established grade to the roofs highest peak	✓		

## Floor Plan including:

20	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	✓		
21	Raised floor surfaces located more than 30 inches above the floor or grade	✓		
22	All exterior and interior shear walls indicated	✓		
23	Shear wall opening shown (Windows, Doors and Garage doors)	✓		
24	Emergency escape and rescue opening shown in each bedroom (net clear opening shown)	✓		
25	Safety glazing of glass where needed	✓		
26	Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 of FBCR)	✓		
27	Stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails (see FBCR SECTION 311)			✓
28	Identify accessibility of bathroom (see FBCR SECTION 322)	✓		

**All materials placed within opening or onto/into exterior walls, soffits or roofs shall have Florida product approval number and mfg. installation information submitted with the plan (see Florida product approval form)**

**GENERAL REQUIREMENTS:**  
**APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL**

Items to Include-  
Each Box shall be  
Circled as  
Applicable

**FBCR 403: Foundation Plans**

		YES	NO	N/A
29	Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing.	✓		
30	All posts and/or column footing including size and reinforcing	✓		
31	Any special support required by soil analysis such as piling.			✓
32	Assumed load-bearing value of soil _____ Pound Per Square Foot	✓		
33	Location of horizontal and vertical steel, for foundation or walls (include # size and type)	✓		

**FBCR 506: CONCRETE SLAB ON GRADE**

34	Show Vapor retarder (6mil. Polyethylene with joints lapped 6 inches and sealed)	✓		
35	Show control joints, synthetic fiber reinforcement or welded fire fabric reinforcement and Supports	✓		

**FBCR 320: PROTECTION AGAINST TERMITES**

36	Indicate on the foundation plan if soil treatment is used for subterranean termite prevention or submit other approved termite protection methods. Protection shall be provided by registered termiticides <i>Treat Soil</i>	✓		
----	---	---	--	--

**FBCR 606: Masonry Walls and Stem walls (load bearing & shear Walls)**

37	Show all materials making up walls, wall height, and Block size, mortar type	✓		
38	Show all Lintel sizes, type, spans and tie-beam sizes and spacing of reinforcement <i>wood frame</i>			✓

**Metal frame shear wall and roof systems shall be designed, signed and sealed by Florida Prof. Engineer or Architect**

**Floor Framing System: First and/or second story**

39	Floor truss package shall including layout and details, signed and sealed by Florida Registered Professional Engineer			✓
40	Show conventional floor joist type, size, span, spacing and attachment to load bearing walls, stem walls and/or piers			✓
41	Girder type, size and spacing to load bearing walls, stem wall and/or piers			✓
42	Attachment of joist to girder			✓
43	Wind load requirements where applicable			✓
44	Show required under-floor crawl space			✓
45	Show required amount of ventilation opening for under-floor spaces			✓
46	Show required covering of ventilation opening			✓
47	Show the required access opening to access to under-floor spaces			✓
	Show the sub-floor structural panel sheathing type, thickness and fastener schedule on the edges &			✓



48	intermediate of the areas structural panel sheathing			✓
49	Show Draftstopping, Fire caulking and Fire blocking			✓
50	Show fireproofing requirements for garages attached to living spaces, per FBCR section 309			✓
51	Provide live and dead load rating of floor framing systems (psf).			✓

## **FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION**

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
52	Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls	✓		
53	Fastener schedule for structural members per table FBCR 602.3 are to be shown	✓		
54	Show wood structural panel's sheathing attachment to studs, joist, trusses, rafters and structural members, showing fastener schedule attachment on the edges & intermediate of the areas structural panel sheathing	✓		
55	Show all required connectors with a max uplift rating and required number of connectors and oc spacing for continuous connection of structural walls to foundation and roof trusses or rafter systems	✓		
56	Show sizes, type, span lengths and required number of support jack studs, king studs for shear wall opening and girder or header per FBCR Table 502.5 (1)	✓		
57	Indicate where pressure treated wood will be placed	✓		
58	Show all wall structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing edges & intermediate areas	✓		
59	A detail showing gable truss bracing, wall balloon framing details or/ and wall hinge bracing detail	✓		

## **FBCR :ROOF SYSTEMS:**

60	Truss design drawing shall meet section FBCR 802.10 Wood trusses	✓		
61	Include a layout and truss details, signed and sealed by Florida Professional Engineer	✓		
62	Show types of connector's assemblies' and resistance uplift rating for all trusses and rafters	✓		
63	Show gable ends with rake beams showing reinforcement or gable truss and wall bracing details	✓		
64	Provide dead load rating of trusses	✓		

## **FBCR 802:Conventional Roof Framing Layout**

65	Rafter and ridge beams sizes, span, species and spacing	✓		
66	Connectors to wall assemblies' include assemblies' resistance to uplift rating	✓		
67	Valley framing and support details	✓		
68	Provide dead load rating of rafter system	✓		

## **FBCR Table 602,3(2) & FBCR 803 ROOF SHEATHING**

69	Include all materials which will make up the roof decking, identification of structural panel sheathing, grade, thickness	✓		
70	Show fastener Size and schedule for structural panel sheathing on the edges & intermediate areas	✓		

## FBCR ROOF ASSEMBLIES FRC Chapter 9

71	Include all materials which will make up the roof assemblies covering	<input checked="" type="checkbox"/>		
72	Submit Florida Product Approval numbers for each component of the roof assemblies covering	<input checked="" type="checkbox"/>		

## FBCR Chapter 11 Energy Efficiency Code for residential building

Residential construction shall comply with this code by using the following compliance methods in the FBCR chapter 11 Residential buildings compliance methods. *Two of the required forms are to be submitted, showing dimensions condition area equal to the total condition living space area*

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
73	Show the insulation R value for the following areas of the structure	<input checked="" type="checkbox"/>		
74	Attic space <i>R-38</i>	<input checked="" type="checkbox"/>		
75	Exterior wall cavity <i>R-19</i>	<input checked="" type="checkbox"/>		
76	Crawl space <i>Concrete Floor</i>			<input checked="" type="checkbox"/>

## HVAC information

77	Submit two copies of a Manual J sizing equipment or equivalent computation study	<input checked="" type="checkbox"/>		
78	Exhaust fans locations in bathrooms <i>Show on Elec. Sheet Page 3</i>	<input checked="" type="checkbox"/>		
79	Show clothes dryer route and total run of exhaust duct	<input checked="" type="checkbox"/>		

## Plumbing Fixture layout shown

80	All fixtures waste water lines shall be shown on the foundation plan			<input checked="" type="checkbox"/>
81	Show the location of water heater	<input checked="" type="checkbox"/>		

## Private Potable Water

82	Pump motor horse power <i>1 1/2 H.P.</i>	<input checked="" type="checkbox"/>		
83	Reservoir pressure tank gallon capacity <i>86 Gal.</i>	<input checked="" type="checkbox"/>		
84	Rating of cycle stop valve if used <i>30 Gal. per min.</i>	<input checked="" type="checkbox"/>		

## Electrical layout shown including

85	Switches, outlets/receptacles, lighting and all required GFCI outlets identified	<input checked="" type="checkbox"/>		
86	Ceiling fans	<input checked="" type="checkbox"/>		
87	Smoke detectors & Carbon dioxide detectors	<input checked="" type="checkbox"/>		
88	Service panel, sub-panel, location(s) and total ampere ratings <i>200 AMP.</i>	<input checked="" type="checkbox"/>		
89	On the electrical plans identify the electrical service overcurrent protection device for the main electrical service. This device shall be installed on the exterior of structures to serve as a disconnecting means for the utility company electrical service. Conductors used from the exterior disconnecting means to a panel or sub panel shall have four-wire conductors, of which one conductor shall be used as an equipment ground. Indicate if the utility company service entrance cable will be of the overhead or underground type. <i>Underground</i>	<input checked="" type="checkbox"/>		

90	Appliances and HVAC equipment and disconnects	✓		
91	Arc Fault Circuits (AFCI) in bedrooms	✓		

**Disclosure Statement for Owner Builders** *If you as the applicant will be acting as an owner builder under section 489.103(7) of the Florida Statutes, submit the required owner builder disclosure statement form.*

### **Notice Of Commencement**

A notice of commencement form **recorded** in the Columbia County Clerk Office is required to be filed with the building department Before Any Inspections can be preformed.

<b>GENERAL REQUIREMENTS:</b> <b>APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</b>		<b>Items to Include-</b> <b>Each Box shall be</b> <b>Circled as</b> <b>Applicable</b>
---	--	--

### **THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS**

		YES	NO	N/A
92	<b>Building Permit Application</b> A current Building Permit Application form is to be completed and submitted for all residential projects	✓		
93	<b>Parcel Number</b> The parcel number (Tax ID number) from the Property Appraiser (386) 758-1084 is required. A copy of property deed is also requested	✓		
94	<b>Environmental Health Permit or Sewer Tap Approval</b> A copy of a approved Columbia County Environmental Health (386) 758-1058	✓		
95	<b>City of Lake City</b> A permit showing an approved waste water sewer tap			✓
96	<b>Toilet facilities shall be provided for all construction sites</b>	✓		
97	<b>Town of Fort White</b> (386) 497-2321 If the parcel in the application for building permit is within the Corporate city limits of Fort White an approval land use development letter issued by the Town of Fort is required to be submitted with the application for a building permit.			✓
98	<b>Flood Information:</b> All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting a application to this office. Any project located within a flood zone where the base flood elevation (100 year flood) has been established shall meet the requirements of Section 8.5.2 of the Columbia County Land Development Regulations. Any project located within a flood zone where the base flood elevation has not been established (Zone A) shall meet the requirements of Section 8.5.3 of the Columbia County Land Development Regulations			✓
99	<b>CERTIFIED FINISHED FLOOR ELEVATIONS</b> will be required on any project where the base flood elevation (100 year flood) has been established			✓
100	A development permit will also be required. Development permit cost is <b>\$50.00</b>			✓
101	<b>Driveway Connection:</b> If the property does not have an existing access to a public road, then an application for a culvert permit ( <b>\$25.00</b> ) must be made. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver ( <b>\$50.00</b> ). All culvert waivers are sent to the Columbia County Public Works Department for approval or denial.	✓		
102	<b>911 Address:</b> If the project is located in an area where a 911 address has not been issued, then application for a 911 address must be applied for and <b>received</b> through the Columbia County Emergency Management Office of 911 Addressing Department (386) 758-1125	✓		



## **Section R101.2.1 of the Florida Building Code Residential:**

**The provisions of Chapter 1, Florida Building Code, Building shall govern the administration and enforcement of the Florida Building Code, Residential.**

**Section 105 of the Florida Building Code defines the:**

### **Time limitation 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.**

### **Single-family residential dwelling.**

**Section 105.3.4 A building permit for a single-family residential dwelling must be issued within 30 working days of application therefor unless unusual circumstances require a longer time for processing the application or unless the permit application fails to satisfy the Florida Building Code or the enforcing agency's laws or ordinances.**

### **Permit intent.**

**Section 105.4.1: A permit issued shall be constructed to be a license to proceed with the work and not as authority to violate, cancel, alter or set aside any of the provisions of the technical codes, nor shall issuance of a permit prevent the building official from thereafter requiring a correction of errors in plans, construction or violations of this code. Every permit issued shall become invalid unless the work authorized by such permit is commenced within six months after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of six months after the time the work is commenced.**

### **If work has commenced.**

**Section 105.4.1.1: If work has commenced and the permit is revoked, becomes null and void, or expires because of lack of progress or abandonment, a new permit covering the proposed construction shall be obtained before proceeding with the work.**

### **New Permit.**

**Section 105.4.1.2: If a new permit is not obtained within 180 days from the date the initial permit became null and void, the building official is authorized to require that any work which has been commenced or completed be removed from the building site. Alternately, a new permit may be issued on application, providing the work in place and required to complete the structure meets all applicable regulations in effect at the time the initial permit became null and void and any regulations which may have become effective between the date of expiration and the date of issuance of the new permit.**

**Work Shall Be:**

**Section 105.4.1.3: Work shall be considered to be in active progress when the permit has received an approved inspection within 180 days. This provision shall not be applicable in case of civil commotion or strike or when the building work is halted due directly to judicial injunction, order or similar process.**

**The Fee:**

**Section 105.4.1.4: The fee for renewal reissuance and extension of a permit shall be set forth by the administrative authority.**

**When the submitted application is approved for permitting the applicant will be notified by phone as to the date and time a building permit will be prepared and issued by the Columbia County Building & Zoning Department**

**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: 2/16/2010 DATE ISSUED: 2/18/2010

**ENHANCED 9-1-1 ADDRESS:**

949 SW MARCIS

TER

LAKE CITY FL 32024

**PROPERTY APPRAISER PARCEL NUMBER:**

13-4S-15-00355-003

**Remarks:**

PARENT PARCEL 13-4S-15-00355-001

Address Issued By:

  
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.**



# Residential System Sizing Calculation

## Summary

Vernon & Lori Berry

, FL

Project Title:  
912051Vernon&LoriBerryRes.

Class 3 Rating  
Registration No. 0  
Climate: North

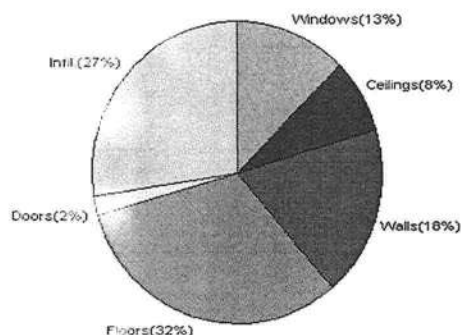
12/18/2009

Location for weather data: Gainesville - Defaults: Latitude(29) Altitude(152 ft.) Temp Range(M)			
Humidity data: Interior RH (50%) Outdoor wet bulb (77F) Humidity difference(54gr.)			
Winter design temperature	33 F	Summer design temperature	92 F
Winter setpoint	70 F	Summer setpoint	75 F
Winter temperature difference	37 F	Summer temperature difference	17 F
<b>Total heating load calculation</b>	<b>32524 Btuh</b>	<b>Total cooling load calculation</b>	<b>26721 Btuh</b>
Submitted heating capacity	% of calc Btuh	Submitted cooling capacity	% of calc Btuh
Total (Electric Heat Pump)	116.8 38000	Sensible (SHR = 0.75)	133.0 28500
Heat Pump + Auxiliary(0.0kW)	116.8 38000	Latent	179.7 9500
		Total (Electric Heat Pump)	142.2 38000

## WINTER CALCULATIONS

Winter Heating Load (for 2192 sqft)

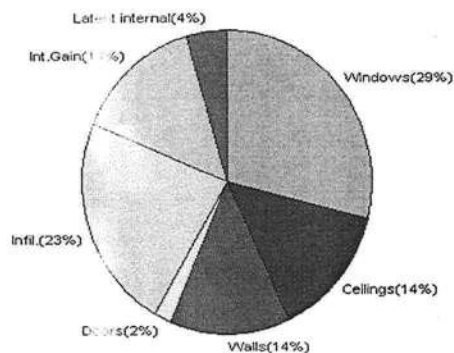
Load component	Load
Window total 277 sqft	4104 Btuh
Wall total 1817 sqft	5966 Btuh
Door total 50 sqft	648 Btuh
Ceiling total 2228 sqft	2625 Btuh
Floor total 238 sqft	10391 Btuh
Infiltration 217 cfm	8790 Btuh
Duct loss	0 Btuh
<b>Subtotal</b>	<b>32524 Btuh</b>
Ventilation 0 cfm	0 Btuh
<b>TOTAL HEAT LOSS</b>	<b>32524 Btuh</b>



## SUMMER CALCULATIONS

Summer Cooling Load (for 2192 sqft)

Load component	Load
Window total 277 sqft	7768 Btuh
Wall total 1817 sqft	3628 Btuh
Door total 50 sqft	490 Btuh
Ceiling total 2228 sqft	3690 Btuh
Floor total	0 Btuh
Infiltration 112 cfm	2081 Btuh
Internal gain	3780 Btuh
Duct gain	0 Btuh
Sens. Ventilation 0 cfm	0 Btuh
<b>Total sensible gain</b>	<b>21436 Btuh</b>
Latent gain(ducts)	0 Btuh
Latent gain(infiltration)	4085 Btuh
Latent gain(ventilation)	0 Btuh
Latent gain(internal/occupants/other)	1200 Btuh
<b>Total latent gain</b>	<b>5285 Btuh</b>
<b>TOTAL HEAT GAIN</b>	<b>26721 Btuh</b>



For Florida residences only

EnergyGauge® System Sizing

PREPARED BY:

DATE: 12/18/09

# System Sizing Calculations - Winter

## Residential Load - Whole House Component Details

Vernon & Lori Berry

Project Title:  
912051Vernon&LoriBerryRes.

Class 3 Rating  
Registration No. 0  
Climate: North

, FL

Reference City: Gainesville (Defaults) Winter Temperature Difference: 37.0 F

12/18/2009

This calculation is for Worst Case. The house has been rotated 315 degrees.

### Component Loads for Whole House

Window	Panes/SHGC/Frame/U	Orientation	Area(sqft)	X	HTM=	Load
1	2, SHGC=0.4, Metal, 0.40	NW	3.0		14.8	44 Btuh
2	2, SHGC=0.4, Metal, 0.40	NW	45.0		14.8	666 Btuh
3	2, SHGC=0.4, Metal, 0.40	NW	20.0		14.8	296 Btuh
4	2, SHGC=0.4, Metal, 0.40	NW	20.0		14.8	296 Btuh
5	2, SHGC=0.4, Metal, 0.40	N	10.0		14.8	148 Btuh
6	2, SHGC=0.4, Metal, 0.40	NW	45.0		14.8	666 Btuh
7	2, SHGC=0.4, Metal, 0.40	NW	30.0		14.8	444 Btuh
8	2, SHGC=0.4, Metal, 0.40	NE	3.0		14.8	44 Btuh
9	2, SHGC=0.4, Metal, 0.40	SE	60.0		14.8	888 Btuh
10	2, SHGC=0.4, Metal, 0.40	SE	13.3		14.8	197 Btuh
11	2, SHGC=0.4, Metal, 0.40	SE	9.0		14.8	133 Btuh
12	2, SHGC=0.4, Metal, 0.40	SW	16.0		14.8	237 Btuh
13	2, SHGC=0.4, Metal, 0.40	SW	3.0		14.8	44 Btuh
Window Total			277(sqft)			4104 Btuh
Walls	Type	R-Value	Area	X	HTM=	Load
1	Frame - Wood - Ext(0.09)	13.0	1537		3.3	5047 Btuh
2	Frame - Wood - Adj(0.09)	13.0	280		3.3	920 Btuh
Wall Total			1817			5966 Btuh
Doors	Type		Area	X	HTM=	Load
1	Insulated - Adjacent		20		12.9	259 Btuh
2	Insulated - Exterior		20		12.9	259 Btuh
3	Insulated - Exterior		10		12.9	130 Btuh
Door Total			50			648Btuh
Ceilings	Type/Color/Surface	R-Value	Area	X	HTM=	Load
1	Vented Attic/D/Shin)	30.0	2228		1.2	2625 Btuh
Ceiling Total			2228			2625Btuh
Floors	Type	R-Value	Size	X	HTM=	Load
1	Slab On Grade	0	238.0 ft(p)		43.7	10391 Btuh
Floor Total			238			10391 Btuh
Zone Envelope Subtotal:						23734 Btuh
Infiltration	Type	ACH X	Zone Volume		CFM=	
	Natural	0.66	19728		217.0	8790 Btuh
Ductload	Partially sealed, R6.0, Supply(Attic), Return(Attic)				(DLM of 0.00)	0 Btuh
Zone #1	Sensible Zone Subtotal					32524 Btuh

# Manual J Winter Calculations

## Residential Load - Component Details (continued)

Vernon & Lori Berry

Project Title:

912051Vernon&LoriBerryRes.

Class 3 Rating

Registration No. 0

Climate: North

, FL

12/18/2009

### WHOLE HOUSE TOTALS

	Subtotal Sensible	32524 Btuh
	Ventilation Sensible	0 Btuh
	Total Btuh Loss	32524 Btuh

Key: Window types (SHGC - Shading coefficient of glass as SHGC numerical value or as clear or tint)

(Frame types - metal, wood or insulated metal)

(U - Window U-Factor or 'DEF' for default)

(HTM - ManualJ Heat Transfer Multiplier)

Key: Floor size (perimeter(p) for slab-on-grade or area for all other floor types )



For Florida residences only



# System Sizing Calculations - Winter

## Residential Load - Room by Room Component Details

Vernon & Lori Berry

Project Title:  
912051Vernon&LoriBerryRes.

Class 3 Rating  
Registration No. 0  
Climate: North

, FL

Reference City: Gainesville (Defaults) Winter Temperature Difference: 37.0 F

12/18/2009

This calculation is for Worst Case. The house has been rotated 315 degrees.

### Component Loads for Zone #1: Main

Window	Panes/SHGC/Frame/U	Orientation	Area(sqft)	X	HTM=	Load
1	2, SHGC=0.4, Metal, 0.40	NW	3.0		14.8	44 Btuh
2	2, SHGC=0.4, Metal, 0.40	NW	45.0		14.8	666 Btuh
3	2, SHGC=0.4, Metal, 0.40	NW	20.0		14.8	296 Btuh
4	2, SHGC=0.4, Metal, 0.40	NW	20.0		14.8	296 Btuh
5	2, SHGC=0.4, Metal, 0.40	N	10.0		14.8	148 Btuh
6	2, SHGC=0.4, Metal, 0.40	NW	45.0		14.8	666 Btuh
7	2, SHGC=0.4, Metal, 0.40	NW	30.0		14.8	444 Btuh
8	2, SHGC=0.4, Metal, 0.40	NE	3.0		14.8	44 Btuh
9	2, SHGC=0.4, Metal, 0.40	SE	60.0		14.8	888 Btuh
10	2, SHGC=0.4, Metal, 0.40	SE	13.3		14.8	197 Btuh
11	2, SHGC=0.4, Metal, 0.40	SE	9.0		14.8	133 Btuh
12	2, SHGC=0.4, Metal, 0.40	SW	16.0		14.8	237 Btuh
13	2, SHGC=0.4, Metal, 0.40	SW	3.0		14.8	44 Btuh
Window Total			277	(sqft)		4104 Btuh
Walls	Type	R-Value	Area	X	HTM=	Load
1	Frame - Wood - Ext(0.09)	13.0	153		3.3	5047 Btuh
2	Frame - Wood - Adj(0.09)	13.0	280		3.3	920 Btuh
Wall Total			181			5966 Btuh
Doors	Type		Area	X	HTM=	Load
1	Insulated - Adjacent		20		12.9	259 Btuh
2	Insulated - Exterior		20		12.9	259 Btuh
3	Insulated - Exterior		10		12.9	130 Btuh
Door Total			50			648 Btuh
Ceilings	Type/Color/Surface	R-Value	Area	X	HTM=	Load
1	Vented Attic/D/Shin)	30.0	222		1.2	2625 Btuh
Ceiling Total			222			2625 Btuh
Floors	Type	R-Value	Size	X	HTM=	Load
1	Slab On Grade	0	238	ft(p)	43.7	10391 Btuh
Floor Total			238			10391 Btuh
Zone Envelope Subtotal:						23734 Btuh
Infiltration	Type	ACH X	Zone Volume		CFM=	
	Natural	0.66	197		217.0	8790 Btuh
Ductload	Partially sealed, R6.0, Supply(Attic), Return(Attic)				(DLM of 0.00)	0 Btuh
Zone #1	Sensible Zone Subtotal					32524 Btuh

# Manual J Winter Calculations

## Residential Load - Component Details (continued)

Vernon & Lori Berry

Project Title:

912051Vernon&LoriBerry Res.

Class 3 Rating

Registration No. 0

Climate: North

, FL

12/18/2009

### WHOLE HOUSE TOTALS

	Subtotal Sensible	32524 Btuh
	Ventilation Sensible	0 Btuh
	Total Btuh Loss	32524 Btuh

Key: Window types (SHGC - Shading coefficient of glass as SHGC numerical value is clear or tint)

(Frame types - metal, wood or insulated metal)

(U - Window U-Factor or 'DEF' for default)

(HTM - ManualJ Heat Transfer Multiplier)

Key: Floor size (perimeter(p) for slab-on-grade or area for all other floor types )



For Florida residences only

# System Sizing Calculations - Summer

## Residential Load - Whole House Component Details

Vernon & Lori Berry

Project Title:  
912051Vernon&LoriBerryRes.

Class 3 Rating  
Registration No. 0  
Climate: North

, FL

Reference City: Gainesville (Defaults) Summer Temperature Difference: 17.0 F

12/18/2009

This calculation is for Worst Case. The house has been rotated 315 degrees.

### Component Loads for Whole House

Window	Type*		Overhang		Window Area(sqft)			HTM		Load	
	Pn/SHGC/U/InSh/ExSh/IS	Ornt	Len	Hgt	Gross	Shaded	Unshaded	Shaded	Unshaded		
1	2, SHGC=0.4, 0.40, None,N,N	NW	0ft.	0ft.	3.0	0.0	3.0	15	34	101	Btuh
2	2, SHGC=0.4, 0.40, None,N,N	NW	0ft.	0ft.	45.0	0.0	45.0	15	34	1522	Btuh
3	2, SHGC=0.4, 0.40, None,N,N	NW	1.5ft	7ft.	20.0	0.0	20.0	15	34	676	Btuh
4	2, SHGC=0.4, 0.40, None,N,N	NW	1.5ft	7ft.	20.0	0.0	20.0	15	34	676	Btuh
5	2, SHGC=0.4, 0.40, None,N,N	N	13.3	8ft.	10.0	0.0	10.0	15	15	153	Btuh
6	2, SHGC=0.4, 0.40, None,N,N	NW	9.5ft	7ft.	45.0	0.0	45.0	15	34	1522	Btuh
7	2, SHGC=0.4, 0.40, None,N,N	NW	7.83	7ft.	30.0	0.0	30.0	15	34	1014	Btuh
8	2, SHGC=0.4, 0.40, None,N,N	NE	0ft.	0ft.	3.0	0.0	3.0	15	34	101	Btuh
9	2, SHGC=0.4, 0.40, None,N,N	SE	9.5ft	7ft.	60.0	60.0	0.0	15	35	916	Btuh
10	2, SHGC=0.4, 0.40, None,N,N	SE	9.5ft	9ft.	13.3	13.3	0.0	15	35	203	Btuh
11	2, SHGC=0.4, 0.40, None,N,N	SE	1.5ft	5ft.	9.0	1.6	7.4	15	35	286	Btuh
12	2, SHGC=0.4, 0.40, None,N,N	SW	1.5ft	6ft.	16.0	2.1	13.9	15	35	523	Btuh
13	2, SHGC=0.4, 0.40, None,N,N	SW	1.5ft	3ft.	3.0	0.0	1.4	15	35	74	Btuh
Window Total					277 (sqft)					7768 Btuh	
Walls	Type		R-Value/U-Value		Area (sqft)			HTM		Load	
1	Frame - Wood - Ext		13.0/0.09		1236.7			2.1		3205 Btuh	
2	Frame - Wood - Adj		13.0/0.09		290.0			1.5		422 Btuh	
Wall Total					1526.7 (sqft)					3628 Btuh	
Doors	Type				Area (sqft)			HTM		Load	
1	Insulated - Adjacent				19.0			9.8		196 Btuh	
2	Insulated - Exterior				19.0			9.8		196 Btuh	
3	Insulated - Exterior				19.0			9.8		98 Btuh	
Door Total					57.0 (sqft)					490 Btuh	
Ceilings	Type/Color/Surface		R-Value		Area (sqft)			HTM		Load	
1	Vented Attic/DarkShingle		30.0		123.0			1.7		3690 Btuh	
Ceiling Total					123.0 (sqft)					3690 Btuh	
Floors	Type		R-Value		Area (sqft)			HTM		Load	
1	Slab On Grade		0.0		0.0 (ft(p))			0.0		0 Btuh	
Floor Total					0.0 (sqft)					0 Btuh	
								Envelope Subtotal:		15575 Btuh	
Infiltration	Type		ACH		Volume (cuft)			CFM=		Load	
	SensibleNatural		0.34		111.8			111.8		2081 Btuh	
Internal gain			Occupants		Btu/hr			Appliance		Load	
			3		X			2400		3780 Btuh	
Duct load	Partially sealed, R6.0, Supply(Attic), Return(Attic)							DGM = 0.00		0.0 Btuh	
								Sensible Zone Load		21436 Btuh	



# Manual J Summer calculations

## Residential Load - Component Details (continued)

Vernon & Lori Berry

Project Title:

912051Vernon&LoriBerry

Res.

Class 3 Rating

Registration No. 0

Climate: North

, FL

12/18/2009

### WHOLE HOUSE TOTALS

Whole House Totals for Cooling	Sensible Envelope Load All	21436 Btuh
	Sensible Duct Load	0 Btuh
	<b>Total Sensible Zone Load</b>	<b>21436 Btuh</b>
	Sensible ventilation	0 Btuh
	Blower	0 Btuh
	<b>Total sensible gain</b>	<b>21436 Btuh</b>
	Latent infiltration gain (for 54 g humidity difference)	4085 Btuh
	Latent ventilation gain	0 Btuh
	Latent duct gain	0 Btuh
	Latent occupant gain (6 people 200 Btuh per person)	1200 Btuh
	Latent other gain	0 Btuh
	<b>Latent total gain</b>	<b>5285 Btuh</b>
	<b>TOTAL GAIN</b>	<b>26721 Btuh</b>

\*Key: Window types (Pn - Number of panes of glass)

(SHGC - Shading coefficient of glass as specified numerical value)

(U - Window U-Factor or 'DEF' for default)

(InSh - Interior shading device: none(N), Blinds(B), Drapes(D))

(ExSh - Exterior shading device: none(N) or numerical value)

(BS - Insect screen: none(N), Full(F) or Half(H))

(Ornt - compass orientation)

as clear or tint)

Roller Shades(R))



For Florida residences only

# System Sizing Calculations - Summer

## Residential Load - Room by Room Component Details

Vernon & Lori Berry

Project Title:

Class 3 Rating

, FL

912051 Vernon&LoriB Res.

Registration No. 0

Climate: North

Reference City: Gainesville (Defaults) Summer temperature: 95 F  
This calculation is for Worst Case. The house has 1200 sq ft of floor area.

12/18/2009

### Component Loads for Zone #1: Main

Window	Type*	Overhang	Window Area (sqft)	HTM	Load
	Pn/SHGC/U/InSh/ExSh/IS	Ornt	Gross	Unshaded	Shaded
1	2, SHGC=0.4, 0.40, None,N,N	NW	0ft.	3.0	15
2	2, SHGC=0.4, 0.40, None,N,N	NW	0ft.	45.0	15
3	2, SHGC=0.4, 0.40, None,N,N	NW	1.5ft	20.0	15
4	2, SHGC=0.4, 0.40, None,N,N	NW	1.5ft	20.0	15
5	2, SHGC=0.4, 0.40, None,N,N	N	13.3	10.0	15
6	2, SHGC=0.4, 0.40, None,N,N	NW	9.5ft	45.0	15
7	2, SHGC=0.4, 0.40, None,N,N	NW	7.83	30.0	15
8	2, SHGC=0.4, 0.40, None,N,N	NE	0ft.	3.0	15
9	2, SHGC=0.4, 0.40, None,N,N	SE	9.5ft	0.0	15
10	2, SHGC=0.4, 0.40, None,N,N	SE	9.5ft	0.0	15
11	2, SHGC=0.4, 0.40, None,N,N	SE	1.5ft	7.4	15
12	2, SHGC=0.4, 0.40, None,N,N	SW	1.5ft	13.9	15
13	2, SHGC=0.4, 0.40, None,N,N	SW	1.5ft	1.4	15
Window Total				7768 Btuh	
Walls	Type	R-Value	Area (sqft)	HTM	Load
1	Frame - Wood - Ext		6.7	2.1	3205 Btuh
2	Frame - Wood - Adj		0.0	1.5	422 Btuh
Wall Total				3628 Btuh	
Doors	Type	R-Value	Area (sqft)	HTM	Load
1	Insulated - Adjacent		0.0	9.8	196 Btuh
2	Insulated - Exterior		0.0	9.8	196 Btuh
3	Insulated - Exterior		0.0	9.8	98 Btuh
Door Total				490 Btuh	
Ceilings	Type/Color/Surface	R-Value	Area (sqft)	HTM	Load
1	Vented Attic/DarkShingle		0.0	1.7	3690 Btuh
Ceiling Total				3690 Btuh	
Floors	Type	R-Value	Area (sqft)	HTM	Load
1	Slab On Grade		0.0	0.0	0 Btuh
Floor Total				0 Btuh	
Envelope Subtotal:					15575 Btuh
Infiltration	Type	R-Value	Area (cuft)	CFM=	Load
	SensibleNatural		28	111.8	2081 Btuh
Internal gain	Occupant		Appliance		Load
			2400		3780 Btuh
Duct load					0.0 Btuh
Sensible Zone Load					21436 Btuh

# Manual J S

## Residential Load -

Vernon & Lori Berry

91205

, FL

# Calculations

## Details (continued)

Res. Class 3 Rating  
Registration No. 0  
Climate: North

12/18/2009

### WHOLE HOUSE TOTALS

<b>Whole House Totals for Cooling</b>	<b>Sensible Envelope</b>
	Sensible Duct Loss
	<b>Total Sensible</b>
	Sensible ventilation
	Blower
	<b>Total sensible</b>
	Latent infiltration
	Latent ventilation
	Latent duct gain
	Latent occupancy
	Latent other gains
	<b>Latent total</b>
	<b>TOTAL COOLING</b>

es	<b>21436 Btuh</b>
	0 Btuh
	<b>21436 Btuh</b>
	0 Btuh
	0 Btuh
	<b>21436 Btuh</b>
humidity difference)	4085 Btuh
	0 Btuh
	0 Btuh
200 Btuh per person)	1200 Btuh
	0 Btuh
	<b>5285 Btuh</b>
	<b>26721 Btuh</b>

\*Key: Window types (Pn - Number of panes of glass)  
(SHGC - Shading coefficient of glass as  
(U - Window U-Factor or 'DEF' for default)  
(InSh - Interior shading device: none(N),  
(ExSh - Exterior shading device: none(N),  
(BS - Insect screen: none(N), Full(F) or  
(Ornt - compass orientation)

as clear or tint)  
or Roller Shades(R))



For Florida residences only



# Residential

Vernon & Lori Berry

, FL

91205

# Low Diversity

net

Berry Res.

Class 3 Rating  
Registration No. 0  
Climate: North

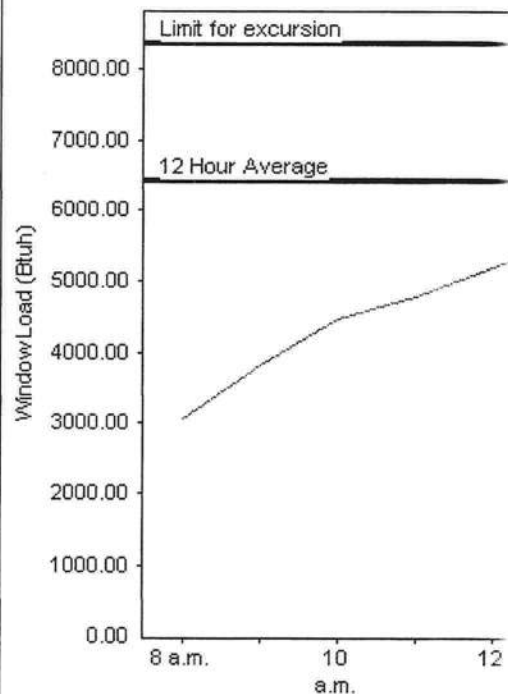
12/18/2009

Weather data for: Gainesville - Default

Summer design temperature  
Summer setpoint  
Summer temperature difference  
Latitude

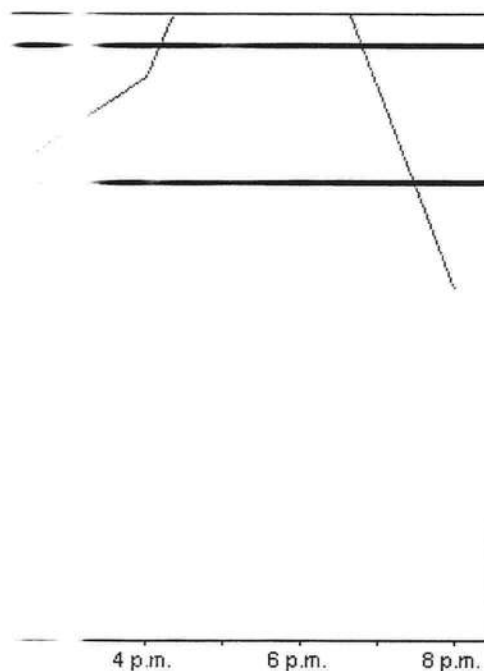
Average window load for July 6435 Btuh  
Peak window load for July 10513 Btu  
Excursion limit(130% of Ave.) 8365 Btuh  
Window excursion (July) 2148 Btuh

## WINDOW A



Total July V

## Peak Loads



(Radiation and conduction)

This application has glass areas that produce l...  
are required to overcome spikes in solar gain for...  
control for problem rooms. Single speed equipm...

for part of the day. Variable air volume devices  
6) Install a zoned system or provide zone  
3) ...le for the application.

EnergyGauge® System

PREPARED BY:

DATE: 12/18/09

Florida references only

