	y Building Permit PERMIT Posted on Premises During Construction 000028578
	000020070
APPLICANT JOSH W. CAPUTO	PHONE 386.755.8599
ADDRESS 195 NW FAIRWAY DRIVE OWNER JOSH & HEATHER CAPUTO	LAKE CITY FL 32055
position and account of the control	PHONE 386.755.8599
ADDRESS 498 SW SPARROW TERRACE CONTRACTOR BRUCE DARE	LAKE CITY FL 32024
	PHONE 352.262.4549
TL AND IT'S APPROX. 500	OME ROAD,TL TO HOPE HENRY,TR TO SPARROW  O YDS ON R
TYPE DEVELOPMENT MODULAR/UTILITY	
HEATED FLOOR AREA TOTAL	L AREA HEIGHT 19.00 STORIES 1
FOUNDATION CONC WALLS FRAMED	ROOF PITCH 6'12 FLOOR CONC
LAND USE & ZONING RSF-2	MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT	25.00 REAR 15.00 SIDE 10.00
NO. EX.D.U. 0 FLOOD ZONE X	DEVELOPMENT PERMIT NO.
PARCEL ID 15-48-16-03023-005 SUBDIV	/ISION
LOT BLOCK PHASE UNI	T TOTAL ACRES7.03
WAIVER 10-0231 BLK Driveway Connection Septic Tank Number LU &  COMMENTS: 1 FOOT ABOVE ROAD.	Zoning checked by Approved for Issuance New Resident
	Check # or Cash 3748
Temporary Power Foundation date/app. by	ONING DEPARTMENT ONLY  Monolithic  date/app. by  date/app. by
The Late of the Control of the Contr	dates app. by
date/app. by	lab Sheathing/Nailing date/app. by
Framing Insulation	auto app. by
date/app. by	date/app. by
Rough-in plumbing above slab and below wood floor	Electrical rough-in
Heat & Air Duct	date/app. by
Peri. beam (	
Permanent power C.O. Final	date/app. by  Culvert
Pump pole Litility Pole	date/app. by date/app. by
date/app. by  Utility Pole date/app. by  M/H	tie downs, blocking, electricity and plumbing
Reconnection RV	date/app. by Re-roof
date/app. by	date/app. by date/app. by
BUILDING PERMIT FEE \$ 0.00 CERTIFICATION	FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 350.00 ZONING CERT. FEE \$ 5	0.00 FIRE FEE \$ WASTE FEE \$
FLOOD DEVELOPMENT FEES FLOOD ZONE FEES	

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.

INSPECTORS OFFICE

"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."

\_ CULVERT FEE \$

CLERKS OFFICE

TOTAL FEE

425.00

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.

	Notice of Treatment
nical Co. (www.flapest.com)	Applicator: Florida Pest Control & Chemical Co. (www.flapest .com) Address: 576 57 City 4 Phone 152 120 3
nit # 28578	Site Location: Subdivision  Lot # Block# Permit # 28578  Address 498 Stul Appearment 7000.
,0	Product used       Active Ingredient       % Concentration         □ Premise       Imidacloprid       0.1%         □ Termidor       Fipronil       0.12%
E Tetrahydrate 23.0%  Wood	□ Bora-Care Disodium Octaborate Tetrahydrate 23.0%  Type treatment: □ Soil □ Wood
Linear feet Gallons Applied	
oil chemical barrier method for atment shall be completed prior	As per Florida Building Code 104.2.6 – If soil chemical barrier method for termite prevention is used, final exterior treatment shall be completed prior to final building approval.
int, initial this line  # 258  Print Technician's Name	If this notice is for the final exterior treatment, initial this line    Same   Compare   Compar
tary Permit Holder - Pink	Remarks:Applicator - White Permit File - Canary Permit Holder - Pink

	apest .com)		% Concentration 0.1% 0.12%	23.0%		Gallons Applied	method for
ent	Applicator: Florida Pest Control & Chemical Co. (www.flapest.com) Address: 536 SE BAYA Ave City Locke CH. Fl 39095 Phone 759-1703	# 28578 nit# NOS	% Con		poo		As per Florida Building Code 104.2.6 – If soil chemical barrier method for termite prevention is used, final exterior treatment shall be completed prior
Notice of Treatment	& Chemical Co. (Ave. Phone 759-	E 1	Active Ingredient Imidacloprid Fipronil	Disodium Octaborate Tetrahydrate	poom 🗆	Linear feet	ior treatment
Notice o	SAVA SOUS	sion Per Charles Per Charles De C	Active Imi	isodium Oct	Soil	Square feet	Code 104.2.6 d, final exter
	Applicator: Florida Pest Control Address: 536 SE 6444 City Lorke CH, Fl 3995	Site Location: Subdivision Lot # Block# Address H98	ise nidor		nent:	reated of attor	da Building ention is use
	Applicator: Address: City Love	Site Location: Lot # Address H98	Product used  Premise  Termidor	☐ Bora-Care	Type treatment:	Area Treated	As per Florida termite prever

Permit Holder - Pink

Permit File - Canary

Applicator - White

Print Technician's Name

Time

Date

Remarks:

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

to final building approval.

			,	
For Office Use Only Application	# 1005-15	Date Received 5/7	By P	ermit # 1815 / 28578
Zoning Official Dat	te/4. 05.// Flood Z	one X lan	d Hear Rec L. De	Zoning RSF-2
FEMA Map # Elevation	MA MFESTA	River N/A	Plans Examiner /	Date 5-//-/0
Comments	/			
NOC DEH Deed or PA Site				
Dev Permit #	□ In Floodway ↓Le	tter of Auth. from Co	ontractor DFW	Comp. letter
IMPACT FEES: EMS			Road/Code_	
School		4 Suspended	_ OUF	M WELL LEHER
Septic Permit No. 10 -023/		0 1	Fax	
Name Authorized Person Signing P	ermit_losh w	. Caputo	Phone 38	6-755-2599
Address 195 NW FAIREN	By Dr. LAKE CI	Ly, FC, 3205	5	. (
Owners Name Josh & Hea			Phone 386	-623-1962
911 Address 498 SWSP4				<u>k</u>
Contractors Name Bruce D	ere, luc.		Phone 352	262-4549
Address 3515 NW 143 ST	6 AINCSUILLE,	FL, 32606	· ·	
Fee Simple Owner Name & Address	s_n/A			
Bonding Co. Name & Address	1/7			
Architect/Engineer Name & Address Mortgage Lenders Name & Address	ss Robert E, bru	9 680 Chestaut	LSX, Cleans	ker. FC. 38756
Mortgage Lenders Name & Address	s First Edual BA	AICOL Florida ca	105 West us the	N 90 PO MOX 2029
Circle the correct power company	- FL Power & Light			
Property ID Number 03023-0	205	Estimated Cos	ل _ t of Construction	212 00000
Subdivision Name N/A		Lot	Block	Unit Phase
Driving Directions From Hoy	190 go sour	th on Sister's	Welcom 1	Poad Tienn
right on Hope Henry	go to Spar	row Ten, 7	Tern left	30 approx
500 yds property on	right	Number of Existi	ina Dwellinas on P	roperty
Construction of 48/364 2	9x 76 Moder	la love To	tal Acreage 7.0	3 Lot Size
o you need a - <u>Culvert Permit</u> or <u>C</u>	Culvert Waiver or Ha	ve an Existing Drive	Total Building	Height 19
Actual Distance of Structure from Pro	perty Lines - Front_	316 side 90	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	72'Rear_786.45
Number of Stories Heated Floo	or Area <u>22048</u>	Total Floor Area	22045g/f/R	oof PHch 6/12
application is hereby made to obtain astallation has commenced prior to f all laws regulating construction in	a permit to do work	and installations as i mit and that all work	indicated. I certify be performed to	
- www	Spice y	11.50		

### **Columbia County Building Permit Application**

<u>TIME LIMITATIONS OF APPLICATION</u>: 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.

<u>TIME LIMITATIONS OF PERMITS:</u> 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.

<u>WARNING TO OWNER:</u> YOUR FAILURE TO RECORD A NOTICE OF COMMENCMENT 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.

Joslew. Caputo	(Owners Must Sign All Applications Before Permit Issuance.)
//	MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.
<u><b>CONTRACTORS AFFIDAVIT:</b></u> By my signature I und written statement to the owner of all the above withing Permit including all application and	derstand and agree that I have informed and provided this written responsibilities in Columbia County for obtaining I permit time limitations.
Contractor's Signature (Permitee)	Contractor's License Number 60-1509539 Columbia County Competency Card Number
Affirmed under penalty of perjury to by the Contractor Personally known or Produced Identification	r and subscribed before me this 0 day of 2010.
State of Florida Notary Signature (For the Contractor)	SARAH REAVERS

MY COMMISSION # DD649347 EXPIRES Merch 11, 2011



### COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

### LETTER OF AUTHORIZATION TO SIGN FOR PERMITS

I, BRUCE E. DARE	(license holder name), licensed qualifier
for B. DARE, Ix.	(company name), do certify that
holder, or is/are employed by me directly or thr officer of the corporation; or, partner as defined person(s) is/are under my direct supervision ar	orm is/are contracted/hired by me, the license ough an employee leasing arrangement; or, is an I in Florida Statutes Chapter 468, and the said and control and is/are authorized to purchase
Printed Name of Person Authorized	Signature of Authorized Person
1. Josh W. CAputo	1. John Cgout
2.	₹.
3.	3.
(company name), do certify that the below referenced person(s) listed on this form is/are contracted/hired by me, the license older, or is/are employed by me directly or through an employee leasing arrangement; or, is an efficer of the corporation; or, partner as defined in Florida Statutes Chapter 488, and the said erron(s) is/are under my direct supervision and control and is/are authorized to purchase ermits, call for inspections and sign on my behalf for this job address only—  Printed Name of Person Authorized  Signature of Authorized Person  1. Jackw Capush  2. 3. 4.  the license holder, realize that I am responsible for all permits purchased, and all work done not my license and fully responsible for compliance with all Florida Statutes, Codes, and ocal Ordinances. I understand that the State and County Licensing Boards have the power and uthority to discipline a license holder for violations committed by him/her, his/her agents, efficers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.  at any time the person(s) you have authorized is/are no longer agents, employee(s), or ficer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow nauthorized persons to use your name and/or license number to obtain permits.  CCC - 1507539  Signature (Notarized)  COUNTY OF: CNOCKING.  TATE OF: Florida  COUNTY OF: CNOCKING.  COUNTY	
Local Ordinances. I understand that the State a authority to discipline a license holder for violatiofficers, or employees and that I have full respond ordinances inherent in the privilege granted officer(s), you must notify this department in we authorization form, which will supersede all pre-	and County Licensing Boards have the power and ions committed by him/her, his/her agents, onsibility for compliance with all statutes, codes d by issuance of such permits.  d is/are no longer agents, employee(s), or iting of the changes and submit a new letter of vious lists. Failure to do so may allow
	CGC-1509539 5/6/10
NOTARY INFORMATION: STATE OF: <u>Florida</u> COUNTY (	OF: Alachua
personally appeared before me and is known b	y me or has produced identification
Dave O Be	
NOTARY'S SIGNATURE	(Seal/Stamp)
The state of the s	SARAH BEAVERS  MY COMMISSION # DD649347

EXPIRES March 11, 2011
FloridaNotaryService.com

# Driving Directions Josh & Heather Caputo 498 SW SPARROW TERR.

Lake City, Fl, 32024

From Building Department, take US HWY. 90 West towards I-75, turn left on Sister's Welcome Road headed SW turn right on Hope Henry St. turn left on SW Sparrow Terr., go approximately 600 yds.,, property on right.

Prepared by: Cheryl Beaty Heritage Title Services of North Florida, Inc. 201 Parshley Street S.W. Live Oak, Florida 32064

File Number: 10-4026A

inst 201012005/63 Date:4/13/2010 Time:11:19 AM Bog, Stamp-Deed:318 50 DC, P. DeWitt Cason, Columbia County Page 1 of 1 B:1192 P.1408

### General Warranty Deed

Made this April 9, 2010 A.D. By Juanita Harrington, conveying non-homestead property, whose address is: 154 S.W. Harrington Glen, Lake City, Fl 32024, hereinafter called the grantor, to Josh W. Caputo and Heather A. Caputo, husband and wife, whose post office address is: 195 N.W. Fairway Drive, Lake City, Fl 32055, hereinafter called the grantee:

(Whenever used herein the term "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Columbia County, Florida, viz:

The North 268.72 feet of the South 543.72 feet of the SE 1/4 of SE 1/4 of Section 15, Township 4 South, Range 16 East, Columbia County, Florida, Less and Except the East 25 feet and Less and Except those lands described in Official Records Book 718, Page 520, of the Public Records of Columbia County, Florida, being more particularly described as follows:

Commence at the Southeast corner of said Section 15 and run thence North 00° 04' 17" East along the East line of said Section 15, 275.00 feet; thence North 89° 42' 49" West 233.67 feet to the Point of Beginning; thence continue North 89° 42' 49" West 1093.76 feet to the West line of said SE 1/4 of SE 1/4; thence North 00° 19' 35" East along said West line 268.72 feet; thence South 89° 43' 01" East 1301.24 feet to the West right-of-way of SW Sparrow Terrace; thence South 00° 04' 17" West along said West right-of-way 59.92 feet to the North line of said lands described in Official Records Book 718, Page 520; thence North 89° 45' 39" West along said North line 208.80 feet to the West line of said lands described in Official Records Book 718; thence South 00° 02' 14" West along said West line 208.70 feet to the Point of Beginning;

Subject to an underground telephone easement.

Parcel 1D Number: 03023-001

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

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31, 2009.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

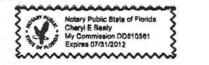
Signed, sealed and delivered in our presence:

Witness Printed Name Cheryl E Rest,

Witness Printed Name Standard Marker Stand

State of Florida County of Columbia

The foregoing instrument was acknowledged before me this 9th day of April, 2010, by Juanita Harrington, conveying non-homestead property, who is/are personally known to me or who has produced FI. D.L. as identification.



Notary Public Chery E. Reaky
Print Name: Chery E. Reaky
My Commission Expires: 7-31-2012

Recorded Rocal

<pre>@ CAM110M01</pre>	erty Maintenance Sel 005 HEATHER A + Conf	*	Columbia Land 1400 AG Bldg 750 Xfea 2150 TOTAL	000 001 000 001 B*
		-Cap?-	7.000 Total	
City St LAVE SITY	FI 74- 220FF		ERnwl ARnwl	Notc
City, St LAKE CITY	FL Zip 32055	N Y	N	
Country	(PUD1)	(PUD2)	(PUD3) Mk	TA06
Splt/Co JVChgC	d pud4	pud5	pud6	
Appr By HC Date 4/30	/2003 AppCode UseCd	000000 VACANT		
TxDist Nbhd 003 15416.00 DIST 3	MktA ExCode Exempt		Code Units	Тр
House# S	treet	MD	Dir #	
p <del>=</del>	City	Zip		
Subd N/A		00 N/A		
	4S Rnge 16 Subd		Lot	
Logals COMM AT SE COR	OF SEC DIN N 375 FT	DLK		
CONT W 1093.76 Map#	OF SEC, RUN N 275 FT FT TO W LINE OF SE1/4	OF SE1/4, N 2 Mnt 4/20/26	268.72 FT, 010 THRESA	+
F1=Task F2=ExTx F3=E	xit F4=Prompt F11=Docs	F10=GoTo F	gUp/PgDn F24	=More

## A&B Well Drilling, Inc.

5873 NW Lake Jeffery Road Lake City, FL 32055 Telephone: (386) 758-3409 Cell: (386) 623-3151 Fax: (386) 758-3410 Owner: Bruce Park

May 7, 2010
To: Columbia County Building Department
Description of Well to be installed for CustomerJosh Caputo
Located @ Address: _498 SW Sparrow Terr
1 HP 15 GPM submersible pump, 1 1/2" drop pipe, 86 gallon captive tank, and backflow prevention.

Sincerely, Bruce N. Park

With SRWMD permit.

President

THIS INSTRUMENT WAS PREPARED BY: FIRST FEDERAL BANK OF FLORIDA 4705 WEST U.S. HIGHWAY 90 P.O. BOX 2029 LAKE CITY, FLORIDA 32056

PERMIT NO		

TAX FOLIO NO. 03023-001

-	18.100110.
	NOTICE OF COMMENCEMENT
STATE	of FLORIDA Columbia
	e undersigned hereby gives notice that improvement will be made to certain real property, and In accordance with Chapter 713, Florida Statutes, wing information is provided in this Notice of Commencement.
1.	Description of property: See attached Exhibit "A"
2.	General description of improvement: Construction of Dwelling
3.	Owner information:  a. Name and address:  Josh W. and Heather A. Caputo  195 NW Fairway Drive, Lake City, F1 32055
	b. Interest in property: Fee Simple c. Name and address of fee simple title holder (if other than Owner): NONE
4.	A Contractor (name and address): C & G Manufactures Homes, Inc.  Hwy 90 West, Lake City, F1 32055
5.	b. Contractor's phone number
	b. Phone Number
	c. Amount of bond:
6.	FIRST FEDERAL BANK OF FLORIDA 4705 WEST U.S. HIGHWAY 90 P. O. BOX 2029 LAKE CITY, FLORIDA 32056 (386) 755-0600  Inst: 201012005765 Date: 4/13/2010 Time: 11.19 AM DC, P. DeWitt Cason, Columbia County Page 1 of 2 B:1192 P.1425
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 HACKER of FIRST FEDERAL BANK OF FLORIDA, 4705 West U.S. Highway 90 / P. O. Box 2029. Lake City. Florida 32056 to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.
9.	Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified).
	WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713, 13, FLORIDA STATUTES AND CAN RESULT IN YOUR PAYMENT WING 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 OF RECORDING YOUR NOTICE OF COMMENCEMENT.  Signature of Owner's Authorized On Sh. W. Caputo  Signatory's Title/Office Heather A. Caputo
	going instrument was acknowledged before me this
mini	** Heather A. Caputo  Signature of Notary Public State of Florida  Charyl E Beaty  My Commission DD810561  Expires 07/31/2012  ** Heather A. Caputo  Signature of Notary Public State of Florida  Print, Type, or Stamp Commission Name-or Notary  Public Commission Number:  Personally Known  Identification Florida  or Produced
	Verification Pursuant to Section 92.525. Florida Statutes

Under penalties of perjury, I declare that I have read the foregoing and that the belief.

Inst. Number: 201012005765 Book: 1192 Page: 1426 Date: 4/13/2010 Time: 11:19:37 AM Page 2 of 2

### Exhibit "A"

The North 268.72 feet of the South 543.72 feet of the SE 1/4 of SE 1/4 of Section 15, Township 4 South, Range 16 East, Columbia County, Florida, Less and Except the East 25 feet and Less and Except those lands described in Official Records Book 718, Page 520, of the Public Records of Columbia County, Florida, being more particularly described as follows:

Commence at the Southeast corner of said Section 15 and run thence North 00° 04' 17" East along the East line of said Section 15, 275.00 feet; thence North 89° 42' 49" West 233.67 feet to the Point of Beginning; thence continue North 89° 42' 49" West 1093.76 feet to the West line of said SE 1/4 of SE 1/4; thence North 00° 19' 35" East along said West line 268.72 feet; thence South 89° 43' 01" East 1301.24 feet to the West right-of-way of SW Sparrow Terrace; thence South 00° 04' 17" West along said West right-of-way 59.92 feet to the North line of said lands described in Official Records Book 718, Page 520; thence North 89° 45' 39" West along said North line 208.80 feet to the West line of said lands described in Official Records Book 718; thence South 00° 02' 14" West along said West line 208.70 feet to the Point of Beginning;

Subject to an underground telephone easement.

File Number: 10-4026 Legal Description with Non Homestead MAS

### STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number\_

PART II - SITEPLAN -Scale: 1 inch = 50 feet. 26 70 76 105 7.03 Aury 208 Notes: Site Plan submitted by MASTER CONTRACTOR Not Approved Plan Approved County Health Department ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH 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:

2/8/2010

DATE ISSUED:

2/12/2010

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

498

SW SPARROW

TER

LAKE CITY

FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

15-4S-16-03023-001

Remarks:

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.

1639

COLUMBIA COUNTY 9-1-1 ADDRESSING APPROVED







DEPARTMENT OF COMMUNITY AFFAIRS

"Dedicated to making Florida a better place to call home" Columbia County

CHARLIE CRIST

Governor

"Dedicated to making Florida a better place to call home" Columbia County

THOMAS G. PELHAM

Secretary

September 11, 2009

The Honorable Stephen E. Bailey, Chairman Board of County Commissioners Columbia County Post Office Drawer 1529 Lake City, Florida 32056-1529

Dear Chairman Bailey:

The Department has completed its review of the proposed Comprehensive Plan Amendment for Columbia County (DCA 09-1), which was received on July 13, 2009. Based on Chapter 163, Florida Statute, we have prepared the attached report, which outlines our findings concerning the amendment. It is particularly important that the County address the 'objections' set forth in our review report so that these issues can be successfully resolved prior to adoption. We have also included a copy of local, regional and state agency comments for your consideration. Within the next 60 days, the County should act by choosing to adopt, adopt with changes or not adopt the proposed amendment. For your assistance, our report outlines procedures for final adoption and transmittal.

The amendment package consists of four amendments to the future land use map proposing to convert lands within the Lake City Designated Urban Development Area. The Department is concerned with the lack of coordination between land use and transportation planning. The amendments are not supported by a professionally acceptable cumulative analysis of the impacts to the road network including impacts to US 90, US 41, and I-10, all of which are part of the Strategic Intermodal System (SIS) as designated by the Florida Department of Transportation.

The Honorable Stephen E. Bailey September 11, 2009 Page 2

If you or your staff have any questions or if we may be of further assistance as you formulate your response to this Report, please contact Ana Richmond, Principal Planner, at (850) 922-1794.

Sincerely

Mike McDaniel, Chief

Office of Comprehensive Planning

MM/ar

Enclosures:

Objections, Recommendations and Comments Report,

**Review Agency Comments** 

cc:

Mr. Brian Kepner, County Planner

Mr. Scott R. Koons, AICP, Executive Director, North Central Florida Regional Planning

Council

### TRANSMITTAL PROCEDURES

This letter and the enclosed external agency comments are being issued pursuant to Rule 9J-11.010, F.A.C. Upon receipt of this letter, Columbia County has 60 days in which to adopt, adopt with changes, or determine that the County will not adopt the proposed amendment. The process for adoption of local comprehensive plan amendments is outlined in s.163.3184, F.S., and Rule 9J-11.011, F.A.C.

Within ten working days of the date of adoption, Columbia County must submit the following to the Department:

Three copies of the adopted comprehensive plan amendments;

A listing of additional changes not previously reviewed;

A listing of findings by the local governing body, if any, which were not included in the ordinance; and

A statement indicating the relationship of the additional changes to the Department's Objections, Recommendations and Comments Report.

The above amendment and documentation are required for the Department to conduct a compliance review, make a compliance determination and issue the appropriate notice of intent.

Please be advised that the Florida Legislature amended Section 163.3184(8)(c), Florida Statutes, requiring the Department to provide a courtesy information statement regarding the Department's Notice of Intent to citizens who furnish their names and addresses at the local government's plan amendment transmittal (proposed) or adoption hearings. In order to provide this courtesy information statement, local governments are required by the law to furnish to the Department the names and addresses of the citizens requesting this information. Please provide these required names and addresses to the Department when you transmit your adopted amendment package for compliance review. In the event no names or addresses are submitted, please provide this information as well. For efficiency, we encourage the submittal information sheet in an electronic format.

# DEPARTMENT OF COMMUNITY AFFAIRS OBJECTIONS, RECOMMENDATIONS AND COMMENTS FOR COLUMBIA COUNTY COMPREHENSIVE PLAN AMENDMENT 09-1

September 11, 2009 Division of Community Planning Office of Comprehensive Planning

This report is prepared pursuant to Rule 9J-11.010, F.A.C.

### INTRODUCTION

The following objections, recommendations and comments are based upon the Department's review of Columbia County's proposed amendment to their comprehensive plan (DCA number 09-1) pursuant to Chapter 163.3184, Florida Statutes (F.S.).

The objections relate to specific requirements of relevant portions of Chapter 9J-5, Florida Administrative Code (F.A.C.), and Chapter 163, Part II, F.S. Each objection includes a recommendation of one approach that might be taken to address the cited objection. Other approaches may be more suitable in specific situations. Some of these objections may have initially been raised by one of the other external review agencies. If there is a difference between the Department's objection and the external agency advisory objection or comment, the Department's objection would take precedence.

Each of these objections must be addressed by the local government and corrected when the amendment is resubmitted for our compliance review. Objections, which are not addressed, may result in a determination that the amendment is not in compliance. The Department may have raised an objection regarding missing data and analysis items, which the local government considers not applicable to its amendment. If that is the case, a statement justifying its non-applicability pursuant to Rule 9J-5.002(2), F.A.C., must be submitted. The Department will make a determination on the non-applicability of the requirement, and if the justification is sufficient, the objection will be considered addressed.

The comments, which follow the objections and recommendations section, are advisory in nature. Comments will not form bases of a determination of non-compliance. They are included to call attention to items raised by our reviewers. The comments can be substantive, concerning planning principles, methodology or logic, as well as editorial in nature dealing with grammar, organization, mapping, and reader comprehension.

Appended to the back of the Department's report are the comment letters from the other state review agencies and other agencies, organizations and individuals. These comments are advisory to the Department and may not form bases of Departmental objections unless they appear under the "Objections" heading in this report.

Columbia County Building Department
Culvert Waiver

Phone: 386-758-1008 Fax: 386-758-2160

# Culvert Waiver No. 000001815

DATE: 05/19/2010 PAW DDAG DEDAG MENAG	28 570	000001313
DATE: 05/18/2010 BUILDING PERMIT NO.	00016	<del>_</del>
APPLICANT JOSH W. CAPUTO	PHONE	386.755.8599
ADDRESS 195 NW FAIRWAY DRIVE	LAKE CITY	FL 32055
OWNER JOSH & HEATHER CAPUTO	PHONE 3	86.755.8599
ADDRESS 498 SW SPARROW TERRACE	LAKE CITY	FL 32024
CONTRACTOR BRUCE DARE	PHONE 3	352.262.4549
LOCATION OF PROPERTY 90-W TO SISTERS WELCOME R	ROAD,TL TO HOPE HE	NRY,TR TO SPARROW,TL
APPROX. 500 YDS & PROPERTY ON R.		
SUBDIVISION/LOT/BLOCK/PHASE/UNIT		
PARCEL ID # 15-4S-16-03023-005		
SIGNATURE:  A SEPARATE CHECK IS REQUIRED  MAKE CHECKS PAYABLE TO BCC	TH THE HEREIN PRO	
PUBLIC WORKS DEPARTME	NT USE ONLY	
I HEREBY CERTIFY THAT I HAVE EXAMINED THIS APPLICATION	ION AND DETERMIN	ED THAT THE
CULVERT WAIVER IS:		
APPROVED		ED - NEEDS A CULVERT PERMIT
COMMENTS: Drainage + Road way	Orgina w	ellenough
1 0 1	ATE: 21 ma	
ANY QUESTIONS PLEASE CONTACT THE PUBLIC WORKS DEP	ARTMENT AT 386-752	2-5955.
135 NE Hernando Ave., Suite B-21 Lake City, FL 32055	EIVEN	September 1



# **COLUMBIA COUNTY, FLORIDA**

partment of Building and Zoning Inspection

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

Parcel Number 15-4S-16-03023-005 Building permit No. 000028578

Use Classification MODULAR/UTILITY

Fire:

48.88

Permit Holder BRUCE DARE

Owner of Building JOSH & HEATHER CAPUTO

Total:

115.88

Waste:

67.00

Location: 498 SW SPARROW TERR., LAKE CITY, FL

Date: 06/24/2010

**Building Inspector** 

POST IN A CONSPICUOUS PLACE (Business Places Only)

### SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 000028578

CONTRACTOR Brace Bare

PHONE 352-262-454

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 <u>REQUIRED</u> 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.

Print Name STEVE THOMAS  License #: EC DOD 1/2/	Signature J. Slave J. Stands Phone #: 386- 752-5/25	
Print NameLicense #:	Signature Phone #:	
Print NameLicense #:	SignaturePhone #:	
Print NameLicense #:	Signature Phone #:	
Print NameLicense #:	SignaturePhone #:	
Print NameLicense#:	Signature Phone #:	
Print NameLicense #:	SignaturePhone #:	
	License #: EC DOD   / 2 /  Print Name License #:  Print Name License #:	License #: EC 000   / 2 /         Phone #: 386 - 752 · 5/2 5           Print Name

Specialty License	License Number	Sub-Contractors Printed Name		Sub-Contractors Signature
MASON		ACCOUNTS OF THE PROPERTY OF TH		
CONCRETE FINISHER		780		
FRAMING				
INSULATION				•
STUCCO			(10)	
DRYWALL			2	
PLASTER		4		* 14 100.00
CABINET INSTALLER				
PAINTING				- Carrier
ACOUSTICAL CEILING				
GLASS				
CERAMIC TILE				
FLOOR COVERING				444
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.

Contractor Forms: Subcontractor forms: 6/09

		* .	,			
J 67		SI	UBCONTRACTOR VERIFICA	TION FORM		
			BE SUBMITTED PRIOR TO	THE ISSUANCE	OF A PERMIT	_ PHONE 352 - 262 - 43
records of the s Ordinance 89-6, exemption, gen	ubcontracto , a contracto eral liability ne permitte	ors who actually di or shall require all insurance and a v d contractor is res	subcontractors to pro alid Certificate of Con	ork under the ovide evidenc npetency lice ected form be	e permit. Per Fl e of workers' c nse in Columbi <i>ring submitted</i>	orida Statute 440 and ompensation or a County.  to this office prior to the
start of that sui				suit iii stop ii	111	2. 110
ELECTRICAL OF	1 12	Gerald W	1. Gust 1485	Signature P	hone #: 386	438-4903 386-75
MECHANICAL/	Print Name_ License #:			1 100	none #:	
PLUMBING/ GAS	Print Name_ License #:				hone #:	
ROOFING	Print Name License #:				hone #:	
SHEET METAL	Print Name License #:				hone #:	•
FIRE SYSTEM/ SPRINKLER	Print Name License#:				hone #:	
SOLAR	Print Name License #:				hone #:	
Specialty Li	cense	License Number	Sub-Contractors I			-Contractors Signature
MASON		CGC 1509539	BLUCE E. DAM		40	4
CONCRETE FIN	IISHER				4	
FRAMING						
INSULATION						
STUCCO						
DRYWALL						

MASON
CONCRETE FINISHER
FRAMING
INSULATION
STUCCO
DRYWALL
PLASTER
CABINET INSTALLER
PAINTING
ACOUSTICAL CEILING
GLASS
CERAMIC TILE
FLOOR COVERING
ALUM/VINYL SIDING
GARAGE DOOR
METAL BLDG ERECTOR

F. S. 440.103 Building permits; identification of minimum premium policy.—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Contractor Forms: Subcontractor form: 6/09

			s	UBCONTRACTOR \	VERIFICAT	ION FORM		
APPLICATION NUM	BER			CONTRACTO				PHONE 352 - 262 - 45
records of the s Ordinance 89-6 exemption, gen Any changes, ti	ubcontract , a contract eral liability ne permitte	ors whor sha or sha or sha or insur	no actually d ill require all rance and a v tractor is res	id the trade spe subcontractors valid Certificate sponsible for th	ecific wo s to prov of Comp ne correc	rk under the ide evidence betency lice ted form be	e permit. Per e of workers' nse in Colum eing submitte	ed to this office prior to the
start of that su							Cork orders d	(e) 1
ELECTRICAL 367					Phone #: 386-438-4903 386-75			
MECHANICAL/ A/C	Print Name David Halls Heating AIR License #: 000 57424			AIR	de 11			
PLUMBING/ GAS	Print Name Lyster C FANILINE  License #: CFC 1426 421				Phone #: 386 - 755-1568			
ROOFING	Print NameLicense #:				SignaturePhone #:			
SHEET METAL	Print Name				SignaturePhone #:			
FIRE SYSTEM/ SPRINKLER	Print NameLicense#:				SignaturePhone #:			
SOLAR	Print NameLicense #:				SignaturePhone #:			
Specialty Li	cense	Licen	ise Number	Sub-Contra	actors Pri	nted Name	Si	ub-Contractors Signature
MASON		CGC	1509539	BLUCE E.	DALL		40	Ch)
CONCRETE FIN	ISHER		#				-	
FRAMING								
INSULATION								
STUCCO								
DRYWALL								
PLASTER								
CABINET INST	ALLER							
PAINTING								
ACOUSTICAL C	EILING							
GLASS								
CERAMIC TILE								

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.

Contractor Forms: Subcontractor form: 6/09

FLOOR COVERING
ALUM/VINYL SIDING

**GARAGE DOOR** 

METAL BLDG ERECTOR

# FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs Residential Performance Method A

Project Name: 2425-0017F C558 Street: City, State, Zip: JACKSONVILLE, Owner: Design Location: FL, Jacksonville		Builder Name: CHAMPION HOME E Permit Office: Columbia Permit Number: 28578 Jurisdiction: 221000	BUILDERS
1. New construction or existing 2. Single family or multiple family 3. Number of units, if multiple family 4. Number of Bedrooms 5. Is this a worst case? 6. Conditioned floor area (ft²) 7. Windows Description a. U-Factor: Dbl, U=0.35 SHGC: SHGC=0.40 b. U-Factor: Dbl, U=0.35 SHGC: SHGC=0.60 c. U-Factor: Dbl, U=0.35 SHGC: SHGC=0.50 d. U-Factor: N/A SHGC: e. U-Factor: N/A SHGC: 8. Floor Types a. Crawlspace b. N/A c. N/A	50.00 ft <sup>2</sup>	9. Wall Types a. Frame - Wood, Exterior b. N/A c. N/A d. N/A 10. Ceiling Types a. Under Attic (Vented) b. N/A c. N/A 11. Ducts a. Sup: Attic Ret: Crawlspace AH: 1 12. Cooling systems a. Central Unit 13. Heating systems a. Electric Heat Pump 14. Hot water systems a. Electric b. Conservation features None 15. Credits	Insulation Area R=19.0 1890.00 ft² R= ft² R= ft² R= ft² Insulation Area R=30.0 2204.00 ft² R= ft² R= ft² Exterior Sup. R= 6, 286 ft²  Cap: 48.0 kBtu/hr SEER: 14  Cap: 48.0 kBtu/hr HSPF: 7.7  Cap: 50 gallons EF: 0.91
Glass/Floor Area: 0.101	Total As-Built Modifie Total Baselin	ed Loads: 39.51 ne Loads: 58.70	PASS
I hereby certify that the plans and specifies calculation are in compliance with Code.  PREPARED BY:  PPROVED  I hereby certify that this building, as with the Florida Energy Code.  OWNER/AGENT:  DATE:	th the Florida Energy  APR-21 2010  designed, is in compliance	Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance with Section 553.908 Florida Statutes.  BUILDING OFFICIAL: DATE:	
- Compliance requires certificate qualifies as certified factory-s		t manufacturer that the air handl N1110.A.3.	ler enclosure

- Compliance requires an air distribution system test report, by a Florida Class 1 Rater, confirming system leakage to outdoors is not greater then 0 cfm at 25 pascals pressure difference in accordance with N1110.A.2.



Modular Building Plens Bramina

Plantin I income AL

# FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs Residential Performance Method A

Street: City, State, Zip: H Owner:	425-0017F C555 HOMESTEAD, FL	*	÷.	Builder Name: CHAMPION HOME Permit Office: Permit Number: Jurisdiction:	BUILDERS
1. New construction or 2. Single family or mult 3. Number of units, if m 4. Number of Bedroom 5. Is this a worst case? 6. Conditioned floor are 7. Windows a. U-Factor: SHGC: b. U-Factor: SHGC: c. U-Factor: SHGC: e. U-Factor: SHGC: 8. Floor Types a. Crawlspace b. N/A c. N/A  Glass/Floor Area:	pultiple family sultiple family sea (ft²)  Description Dbl, U=0.35 SHGC=0.40 Dbl, U=0.35 SHGC=0.60 Dbl, U=0.35 SHGC=0.50 N/A N/A	New (From Plans) Single-family 1 4 Yes 2204 Area 155.00 ft² 50.00 ft² 18.00 ft² ft² ft² ft² Insulation Area R=11.0 2204.00 ft² R= ft² R= ft² Total As-Built Mo		9. Wall Types a. Frame - Wood, Exterior b. N/A c. N/A d. N/A  10. Ceiling Types a. Under Attic (Vented) b. N/A c. N/A  11. Ducts a. Sup: Attic Ret: Crawlspace AH: 12. Cooling systems a. Central Unit  13. Heating systems a. Electric Heat Pump  14. Hot water systems a. Electric b. Conservation features None 15. Credits  d Loads: 53.90 e Loads: 76.57	Insulation Area R=19.0 1890.00 ft² R= ft² R= ft² R= ft² Insulation Area R=30.0 2204.00 ft² R= ft² R= ft² Exterior Sup. R= 6, 286 ft²  Cap: 48.0 kBtu/hr SEER: 14  Cap: 48.0 kBtu/hr HSPF: 7.7  Cap: 50 gallons EF: 0.91  PStat
this calculation are in Code.  PREPARED BY: DATE:	OVED APR	cifications covered by the Florida Energy  2010 esigned, is in compliance		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.	COD WE TRUST

- Compliance requires certification by the air handler unit manufacturer that the air handler enclosure qualifies as certified factory-sealed in accordance with N1110.A.3.
- Compliance requires an air distribution system test report, by a Florida Class 1 Rater, confirming system leakage to outdoors is not greater then 0 cfm at 25 pascals pressure difference in accordance with N1110.A.2.

DATE:



Approved By SCOTT & PRANCIS

Page 1 of 5

Migdular Building Plens Basedner

Ficelda Liberrac No. 8669-42

DATE:

### FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs Residential Performance Method A

Project Name: 2425-0017F C55 Street: City, State, Zip: LAKELAND, FL Owner: Design Location: FL, Lakeland		Builder Name: CHAMPION HOME E Permit Office: Permit Number: Jurisdiction:	BUILDERS
<ol> <li>New construction or existing</li> <li>Single family or multiple family</li> <li>Number of units, if multiple family</li> <li>Number of Bedrooms</li> <li>Is this a worst case?</li> <li>Conditioned floor area (ft²)</li> <li>Windows Description         <ul> <li>U-Factor: Dbl, U=0.38</li> <li>SHGC: SHGC=0.46</li> <li>U-Factor: Dbl, U=0.35</li> <li>SHGC: SHGC=0.60</li> <li>U-Factor: Dbl, U=0.35</li> <li>SHGC: SHGC=0.50</li> <li>U-Factor: N/A</li> <li>SHGC: N/A</li> </ul> </li> <li>SHGC: N/A</li> </ol>	5 155.00 ft² 5 50.00 ft² 6 18.00 ft²	9. Wall Types a. Frame - Wood, Exterior b. N/A c. N/A d. N/A 10. Ceiling Types a. Under Attic (Vented) b. N/A c. N/A 11. Ducts a. Sup: Attic Ret: Crawlspace AH: 12. Cooling systems a. Central Unit  13. Heating systems a. Electric Heat Pump  14. Hot water systems a. Electric b. Conservation features None  15. Credits	Insulation Area R=19.0 1890.00 ft² R= ft² R= ft² R= ft² Insulation Area R=30.0 2204.00 ft² R= ft² R= ft² R= ft² Cap: 48.0 kBtu/hr SEER: 14  Cap: 48.0 kBtu/hr HSPF: 7.7  Cap: 50 gallons EF: 0.91
Glass/Floor Area: 0.101	Total As-Built Modifie Total Baselir	ed Loads: 45.51 ne Loads: 65.55	PASS
I hereby certify that the plans and sy this calculation are in compliance w Code.  PREPARED BY:  I hereby certify that this building, as with the Florida Energy Code.  OWNER/AGENT:	21 2010	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:	GOD WE TRUST

- Compliance requires certification by the air handler unit manufacturer that the air handler enclosure qualifies as certified factory-sealed in accordance with N1110.A.3.
- Compliance requires an air distribution system test report, by a Florida Class 1 Rater, confirming system leakage to outdoors is not greater then 0 cfm at 25 pascals pressure difference in accordance with N1110 A 2.

DATE: .



Mcdular Building Plane Brames Page 1 of 5
Florida License No. SMP-42

DATE: \_