

DATE 05/03/2017

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000035263

APPLICANT L. ROBERT BEVILLE PHONE 352.231.4596

ADDRESS 1107 SE BIBLE CAMP ROAD HIGH SPRINGS FL 32643

OWNER L. ROBERT BEVILLE PHONE 352.231.4596

ADDRESS 1107 SE BIBLE CAMP ST HIGH SPRINGS FL 32643

CONTRACTOR LESLIE ROBERT BEVILLE PHONE 352-231-4596

LOCATION OF PROPERTY 441-S. L SPRITE LOOP, L BIBLE CAMP ST. APPROX. 7/10 MILE ON LEFT (2ND PROPERTY ON LEFT PAST JIM HALEY TERR)

TYPE DEVELOPMENT SFD, UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA 576.00 TOTAL AREA HEIGHT STORIES 1

FOUNDATION PIERS WALLS FRAMED ROOF PITCH FLOOR WOOD

LAND USE & ZONING ESA-2 MAX. HEIGHT 35

Minimum Set Back Requirements: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 1 FLOOD ZONE AE DEVELOPMENT PERMIT NO. 17-008

PARCEL ID 35-6S-17-09859-809 SUBDIVISION HAWK RIDGE ACRES

LOT 9 BLOCK PHASE UNIT 0 TOTAL ACRES 13.22

OWNER X Leslie Robert Beville

Culvert Permit No. Culvert Waiver Contractor's License Number Applicant Owner/Contractor

EXISTING 17-0227 LH TC N

Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident Time/STUP No.

COMMENTS: NOC ON FILE. REPLACING BURNT DOWN MH - NO CHARGE. SURVEY W/ CONTOURS.

MINIMUM FLOOR ELEVATION 55'. NEED ELEVATION CERTIFICATE-FINISHED CONST

INCLUDING MACHINERY BEFORE POWER Check # or Cash NO CHARGE

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

Permanent power C.O. Final Culvert

 date/app. by date/app. by

Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing

 date/app. by date/app. by

Reconnection RV Re-roof

 date/app. by date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00

MISC. FEES \$ 0.00 ZONING CERT. FEE \$ FIRE FEE \$ 0.00 WASTE FEE \$

PLAN REVIEW FEE \$ DP & FLOOD ZONE FEE \$ CULVERT FEE \$ **TOTAL FEE** 0.00

INSPECTORS OFFICE CLERKS OFFICE

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY.

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

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

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT 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 INSPECTION.

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

For Office Use Only Application # 170409 Date Received 4/1 By LH Permit # 35263
Zoning Official WHD Date 5-3-17 Flood Zone AE Land Use ESA Zoning ESA-2
FEMA Map # 0512C Elevation 54' MFE 55' River Snake Plans Examiner T.C. Date 5-3-17
Comments Need Elevation Certificate Before, Perm Paper
☒ NOC ☐ EH ☒ Deed or PA ☒ Site Plan ☐ State Road Info ☒ Well letter ☒ 911 Sheet ☐ Parent Parcel #
☒ Dev Permit # 17-008 ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter
☒ Owner Builder Disclosure Statement ☐ Land Owner Affidavit ☐ Ellisville Water ☒ App Fee Paid ☒ Sub VF Form

Septic Permit No. 17-0227 OR City Water Fax

Applicant (Who will sign/pickup the permit) Robert Beville Phone 352-231-4594

Address 1107 SE Bible Camp St. High Springs Fl 32643

Owners Name Leslie Robert Beville Phone 352-231-4594

911 Address 1107 SE Bible Camp St. High Springs Fl 32643

Contractors Name Leslie Robert Beville (owner) Phone 352-231-4594

Address

Contractor Email ***Include to get updates on this job.

Fee Simple Owner Name & Address Milce - 352-258-1680

Bonding Co. Name & Address N/A

Architect/Engineer Name & Address Victor Raymus 4825 SW 19th St. Gainesville Fl 32608

Mortgage Lenders Name & Address N/A 352-278-2518

Circle the correct power company - FL Power & Light Clay Elec. Suwannee Valley Elec. - Duke Energy

Property ID Number 35-65-17-09859-809 Estimated Construction Cost 10,000.00

Subdivision Name Hawkes Ridge Acres Unrec. Lot 9 Block Unit Phase

Driving Directions from a Major Road 441 S, (L) SE Sprite Loop,

(L) Bible Camp St, approx. 7/10 mile on left
2nd Property past Jim Haley Tr

Construction of SFD, utility Commercial OR ☒ Residential

Proposed Use/Occupancy Home site Number of Existing Dwellings on Property 1 (Burnt)

Is the Building Fire Sprinkled? NO If Yes, blueprints included Or Explain

Circle Proposed - Culvert Permit or Culvert Waiver or D.O.T. Permit or Have an Existing Drive

Actual Distance of Structure from Property Lines - Front 125' Side 245' Side 150 +/- Rear 1100 +/-

Number of Stories 1 Heated Floor Area 576 Total Floor Area 576 Acreage 13.22

Zoning Applications applied for (Site & Development Plan, Special Exception, etc.) Replacing Burnt mobile

MH Permit # 21752

Robert Advised of 1' Rise & EC Page 1 of 2 (Both Pages must be submitted together.) Revised 7-1-15

Columbia County Building Permit Application

CODE: Florida Building Code 2014 and the 2011 National Electrical Code.

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.

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 pursued in good faith or a permit has been issued.

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 CONTRACTOR AND AGENT: **YOU ARE HEREBY NOTIFIED** as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes to lot grades that result in ponding of water, or other damage to roadway and other public infrastructure facilities caused by you or your contractor, subcontractors, agents or representatives in the construction and/or improvement of the building and lot for which this permit is issued. No certificate of occupancy will be issued until all corrective work to these public infrastructures and facilities has been corrected.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNERS CERTIFICATION: I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

NOTICE TO OWNER: There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

Robert Beville
Print Owners Name

Leslie Beville
Owners Signature

****Property owners must sign here before any permit will be issued.**

****If this is an Owner Builder Permit Application then, ONLY the owner can sign the building permit when it is issued.**

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

Contractor's Signature

Contractor's License Number
Columbia County
Competency Card Number _____

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

Personally known _____ or Produced Identification _____

SEAL:

State of Florida Notary Signature (For the Contractor)

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

35-65-17-09859-809

Clerk's Office Stamp

Inst: 20171206078 Date: 04/04/2017 Time: 11:33AM
Page 1 of 1 B: 1334 P: 90, P. DeWitt Cason, Clerk of Court Colum
County. By: BD
Deputy Clerk

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

1. Description of property (legal description):
a) Street (job) Address: 1107 SE Bible Camp St High Springs Fl 32643
2. General description of improvements: Single family Dwelling
3. Owner Information or Lessee information if the Lessee contracted for the improvements:
a) Name and address: Leslie R. Beville
b) Name and address of fee simple titleholder (if other than owner):
c) Interest in property: Owner
4. Contractor Information
a) Name and address: Leslie R. Beville
b) Telephone No.: 352-231-4596
5. Surety Information (if applicable, a copy of the payment bond is attached):
a) Name and address:
b) Amount of Bond:
c) Telephone No.:
6. Lender
a) Name and address: N/A
b) Phone No.:
7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:
a) Name and address:
b) Telephone No.:
8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:
a) Name: _____ OF _____
b) Telephone No.: _____
9. Expiration date of Notice of Commencement (the expiration date will be 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 YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

STATE OF FLORIDA
COUNTY OF COLUMBIA

10. Leslie Robert Beville
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Leslie Robert Beville & 1/2
Printed Name and Signatory's Title/Office

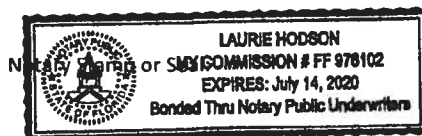
The foregoing instrument was acknowledged before me, a Florida Notary, this 4 day of April, 2017, by:

Leslie Robert Beville as Owner for Self
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

Personally Known ☒ OR Produced Identification _____ Type _____

Notary Signature

[Signature]



SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # 1704-09 JOB NAME Robert Beville

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

Columbia County issues combination permits. 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 general contractors permit.

NOTE: It shall be the responsibility of the general contractor to make sure that all of the subcontractors are licensed with the Columbia County Building Department.

Use website to confirm licenses: <http://www.columbiacountyfla.com/PermitSearch/ContractorSearch.aspx>

NOTE: If this should change prior to completion of the project, it is your responsibility to have a corrected form submitted to our office, before that work has begun.

Violations will result in stop work orders and/or fines.

ELECTRICAL =	Print Name _____ Signature _____ Company Name: _____ CC# _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
MECHANICAL/A/C =	Print Name _____ Signature _____ Company Name: _____ CC# _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
PLUMBING/GAS =	Print Name _____ Signature _____ Company Name: _____ CC# _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
ROOFING =	Print Name _____ Signature _____ Company Name: _____ CC# _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SHEET METAL =	Print Name _____ Signature _____ Company Name: _____ CC# _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
FIRE SYSTEM/SPRINKLER =	Print Name _____ Signature _____ Company Name: _____ CC# _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SOLAR =	Print Name _____ Signature _____ Company Name: _____ CC# _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
STATE SPECIALTY =	Print Name _____ Signature _____ Company Name: _____ CC# _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 17-0227 E
DATE PAID: 4/4/17
FEE PAID: 6000
RECEIPT #: _____

APPLICATION FOR:

☐ New System ☒ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐ _____

APPLICANT: Leslie Robert Beville Jr.

AGENT: _____ TELEPHONE: 352-231 4596

MAILING ADDRESS: 1107 SE Bible camp st 32643 High 5.

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 9 BLOCK: _____ SUBDIVISION: Hawk Ridge PLATTED: 82/19/78

PROPERTY ID #: 35-65-17-09859-309 ZONING: Ag I/M OR EQUIVALENT: ☒ Y ☒ N

PROPERTY SIZE: 13 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☒ N DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 1107 SE Bible camp st

DIRECTIONS TO PROPERTY: 441 south to Oheeno park
Bibel camp Rd

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
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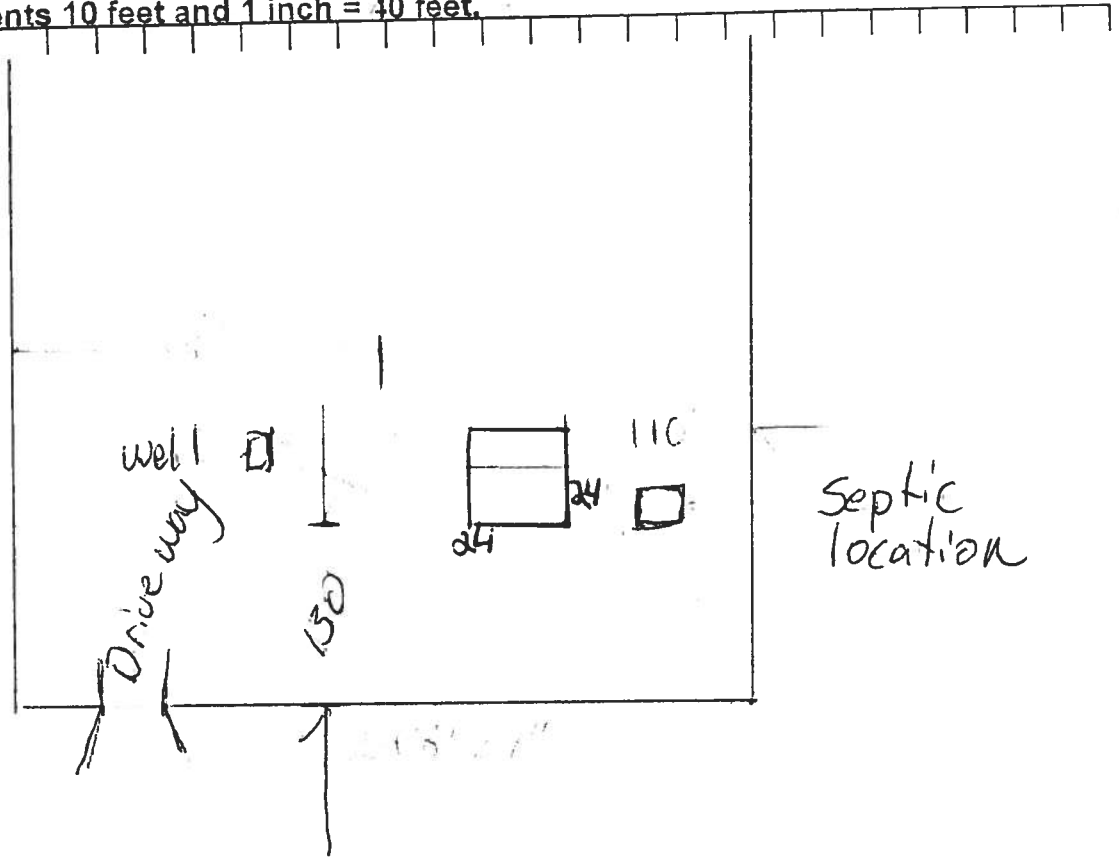
1	<u>House</u>	<u>1</u>	<u>576</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Leslie Robert Beville Jr. DATE: _____

Permit Application Number 17-0227E

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes

[illegible]

Notes: _____

Site Plan submitted by: J.R. Beall Co. Date 4/4/17
Plan Approved ☒ Not Approved _____
By Travis van Nieuwen ES1 Columbia County Health Department

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC
(Stock Number: 5744-002-4015-6)



COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

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

OWNER BUILDER DISCLOSURE STATEMENT

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

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

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

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

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

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

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

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

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

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

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

1107 SE Bible Camp St. High Springs Fl 32643

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

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

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

TYPE OF CONSTRUCTION

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

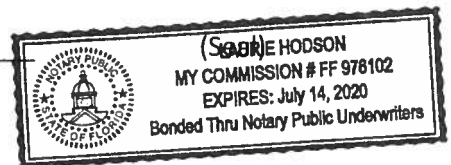
I, Leslie Robert Beville, have been advised of the above disclosure statement for exemption from contractor licensing as an owner/builder. I agree to comply with all requirements provided for in Florida Statutes allowing this exception for the construction permitted by Columbia County Building Permit.

Leslie Robert Beville Date 4-4-17
Owner Builder Signature

NOTARY OF OWNER BUILDER SIGNATURE

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

Notary Signature [Signature] Date 4-4-17



FOR BUILDING DEPARTMENT USE ONLY

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

Building Official/Representative [Signature]

dated: 3/2/2017

Parcel: 35-6S-17-09859-809

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

<< Next Lower Parcel Next Higher Parcel >>

2016 TRIM (pdf)

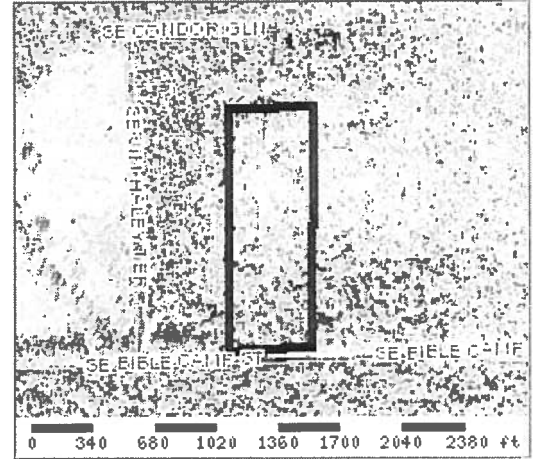
Interactive GIS Map

Print

Search Result: 1 of 4

Next >>

Owner's Name	BEVILLE LESLIE R		
Mailing Address	1107 SE BIBLE CAMP ST HIGH SPRINGS, FL 32643		
Site Address	1107 SE BIBLE CAMP ST		
Use Desc. (code)	MOBILE HOM (000200)		
Tax District	3 (County)	Neighborhood	35617
Land Area	13.220 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
AKA LOT 9 HAWKS RIDGE ACRES UNREC: BEG INTERS N R/W BIBLE CAMP RD WITH W LINE OF SEC. RUN N 1321.01 FT, E 435.02 FT, S 1320.04 FT, W 437.96 FT TO POB. ORB 885-1609, QCD 1055-79.			



Mkt Land Value	cnt: (0)	\$22,385.00
Ag Land Value	cnt: (3)	\$0.00
Building Value	cnt: (1)	\$4,790.00
FOB Value	cnt: (1)	\$960.00
Total Appraised Value		\$28,135.00
Just Value		\$28,135.00
Class Value		\$0.00
Assessed Value		\$26,539.00
Exempt Value	(code: HX H3)	\$25,000.00
Total Taxable Value	Cnty: \$1,539 Other: \$1,539 Schl: \$1,539	

Mkt Land Value	cnt: (0)	\$22,385.00
Ag Land Value	cnt: (3)	\$0.00
Building Value	cnt: (1)	\$4,885.00
XFOB Value	cnt: (1)	\$960.00
Total Appraised Value		\$28,230.00
Just Value		\$28,230.00
Class Value		\$0.00
Assessed Value		\$27,096.00
Exempt Value	(code: HX H3)	\$25,000.00
Total Taxable Value	Cnty: \$2,096 Other: \$2,096 Schl: \$2,096	

NOTE: 2017 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Similar Sales w ithin 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
1/3/1999	885/1609	WD	V	Q		\$24,500.00

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1981	BELOW AVG. (03)	672	1152	\$4,885.00

Note: All S.F. calculations are based on exterior building dimensions.

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	2004	\$960.00	0000192.000	12 x 16 x 0	(000.00)

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000200	MBL HM (MKT)	6.61 AC	1.00/1.00/1.00/1.00	\$2,884.00	\$19,063.00
009630	SWAMP (MKT)	6.61 AC	1.00/1.00/1.00/0.80	\$200.00	\$1,322.00
009945	WELL/SEPT (MKT)	1 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00

A	FDID: 29091	State: FL	Incident Date: MM 01 DD 24 YYYY 2016	Station: 49	Incident Number: CCFR16CAD000262	Exposure: 0	NFIRS-1 Basic
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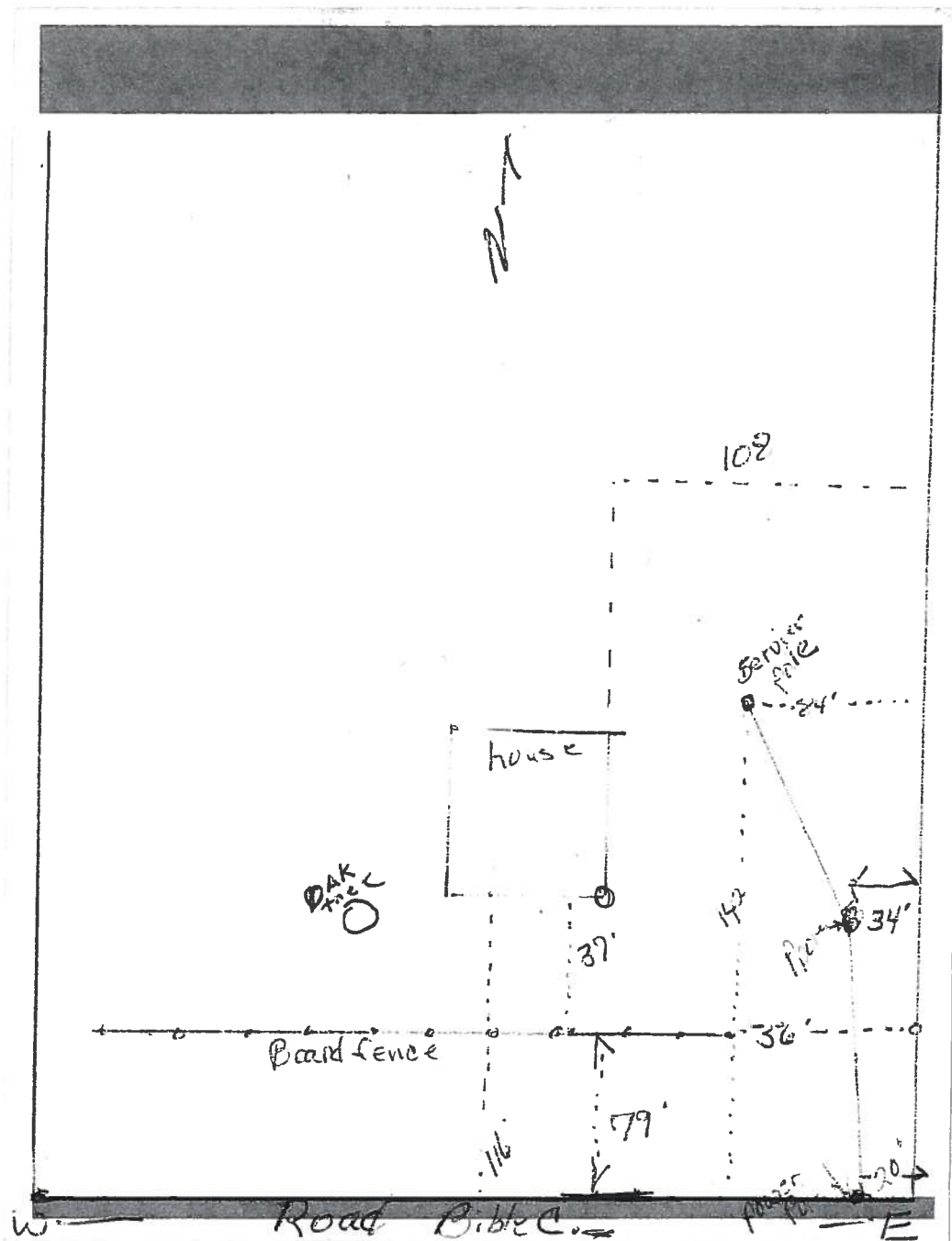
B Location Type	<input checked="" type="checkbox"/> Street address <input type="checkbox"/> Intersection <input type="checkbox"/> In front of <input type="checkbox"/> Rear of <input type="checkbox"/> Adjacent to <input type="checkbox"/> Directions <input type="checkbox"/> US National Grid			Check this box to indicate that the address for this incident is provided on the Wildland Fire Module in Section B - Alternative Location Specification - Use only for wildland fires Number Milepost: [] Prefix: [] Street or highway: BIBLE CAMP Apt Suite Room: [] City: HIGH SPRINGS State: FL Zip Code: 32643 Census Tract: [] - [] Street Type: ST		
------------------------	---	--	--	--	--	--

C Incident Type	E1 Dates and Times	E2 Shifts and Alarms	E3 Special Studies
121 Fire in mobile home used as fixed residence D Aid Given or Received 1 Mutual aid received 2 <input checked="" type="checkbox"/> Automatic aid received 3 Mutual aid given 4 Automatic aid given 5 Other aid given N None	Check boxes if dates are the same as Alarm Date Alarm: Month 01 Day 24 Year 2016 Hour 07 Min 55 Sec 00 Arrival: Month 01 Day 24 Year 2016 Hour 08 Min 04 Sec 00 Controlled: [] Last Unit Cleared: Month 01 Day 24 Year 2016 Hour 11 Min 38 Sec 00	Local Option: C Shift: 2 Alarm: 49 District: []	Local Option: [] Special Study: [] Special Study Value: []

F Actions Taken	G1 Resources	G2 Estimated Dollar Losses and Values
11 Extinguishment by fire service personnel Primary Action Taken: 1	Check this box and test this block if an Apparatus or Personnel Module is used Apparatus: 5 Personnel: 10 EMS: 0 Other: 4 Check box if resources counts include aid received resources	LOSSES: Required for all fires (arrow) Optional for non-fires Property \$: 25,000 Contents \$: 25,000 PRE-INCIDENT VALUE: Optional Property \$: 25,000 Contents \$: 25,000

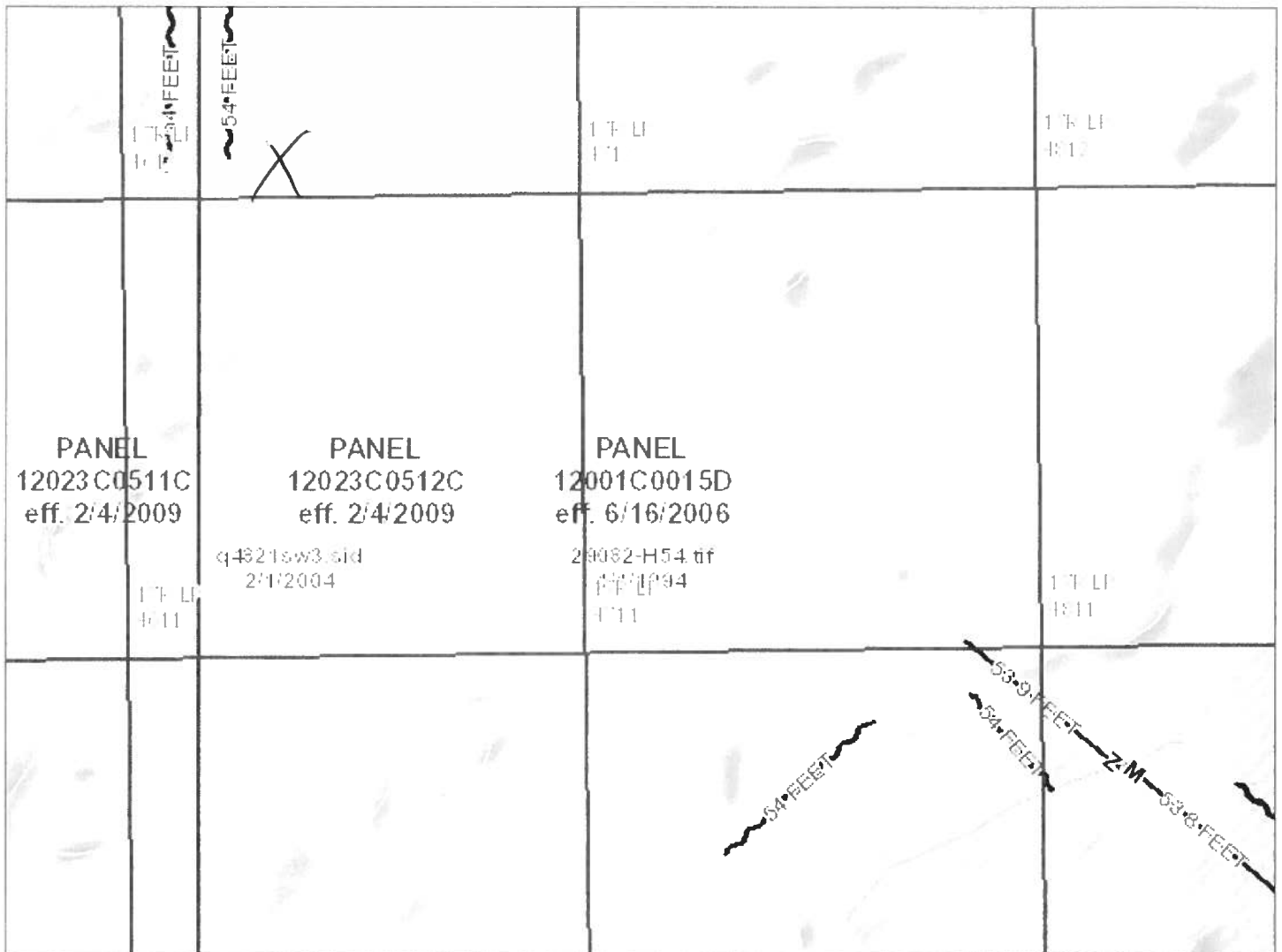
Completed Modules	H1 Casualties	H3 Hazardous Materials Release	I Mixed Use Property
<input checked="" type="checkbox"/> Fire 2 <input checked="" type="checkbox"/> Structure Fire-3 Civilian Fire Cas -4 Fire Service Cas -5 EMS-6 HazMat 7 WildLand Fire-8 <input checked="" type="checkbox"/> Apparatus-9 <input checked="" type="checkbox"/> Personnel-10 <input checked="" type="checkbox"/> Arson-11	Death Injury Fire Service: 0 0 Civilian: 0 0 H2 Detector 1 Required for confined fires Detector alerted occupants 2 Detector did not alert occupants U <input checked="" type="checkbox"/> Unknown	<input checked="" type="checkbox"/> None 0 Special HazMat actions required or spill >= 55 gal 1 Natural gas - slow leak, no evac or HazMat actions 2 Propane gas - Less than a 21 lb tank 3 Gasoline - vehicle fuel tank or portable container 4 Kerosene - fuel-burning equipment/portable storage 5 Diesel fuel/fuel oil - vehicle fuel tank/portable 6 Household/office solvent or chemical spill 7 Motor oil - from engine or portable container 8 Paint - spills less than 55 gallons N <input checked="" type="checkbox"/> None	00 Mixed use - other 10 Assembly use 20 Educational use 30 Medical use 40 Residential use 50 P.W. of stores 53 Enclosed mall 58 Business and residential use 59 Office use 60 Industrial use 63 Military use 65 Farm use NN <input checked="" type="checkbox"/> Not mixed use

5-3-17
Site Plan

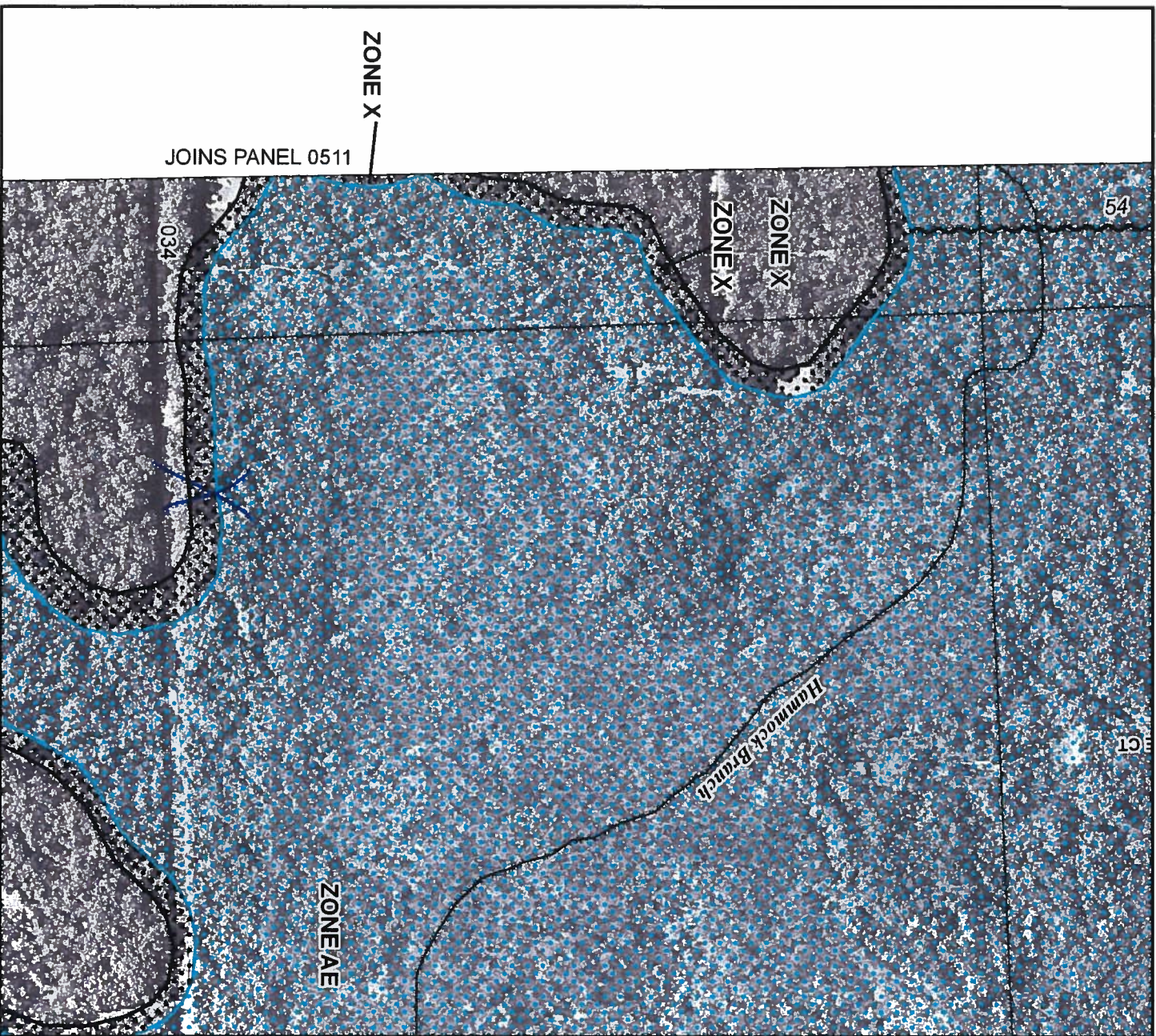


FEMA's National Flood Hazard Layer (Official)

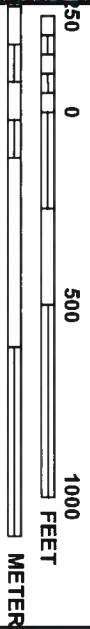
Data from Flood Insurance Rate Maps (FIRMs) where available digitally. New NFHL FIRMette Print app available: <http://tinyurl.com/j4xwp5e>



USGS The National Map: Orthoimagery | National Geospatial-Intelligence Agency (NGA); Delta State University; Esri | Sources: Esri, USGS, NOAA | Sources: Esri, DeLorme, USGS, NPS | Print here instead: <http://tinyurl.com/j4xwp5e> Support: FEMAMapSpecialist@riskmapcds.com



MAP SCALE 1" = 500'



NFIP

PANEL 0512C

FIRM

FLOOD INSURANCE RATE MAP
COLUMBIA COUNTY,
FLORIDA
AND INCORPORATED AREAS

PANEL 512 OF 552

(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:

COMMUNITY	NUMBER	PANEL	SUFFIX
COLUMBIA COUNTY	120070	0512	C

Notice to User: The Map Number shown below should be used when placing map orders; the Community Number shown above should be used on insurance applications for the subject community.



MAP NUMBER
12023C0512C
EFFECTIVE DATE
FEBRUARY 4, 2009

Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at www.msc.fema.gov

Legend

Parcels

House Number Labels

Flood Zones

0.2 PCT ANNUAL CHANCE

A

AE

AH

Base Flood Elevations

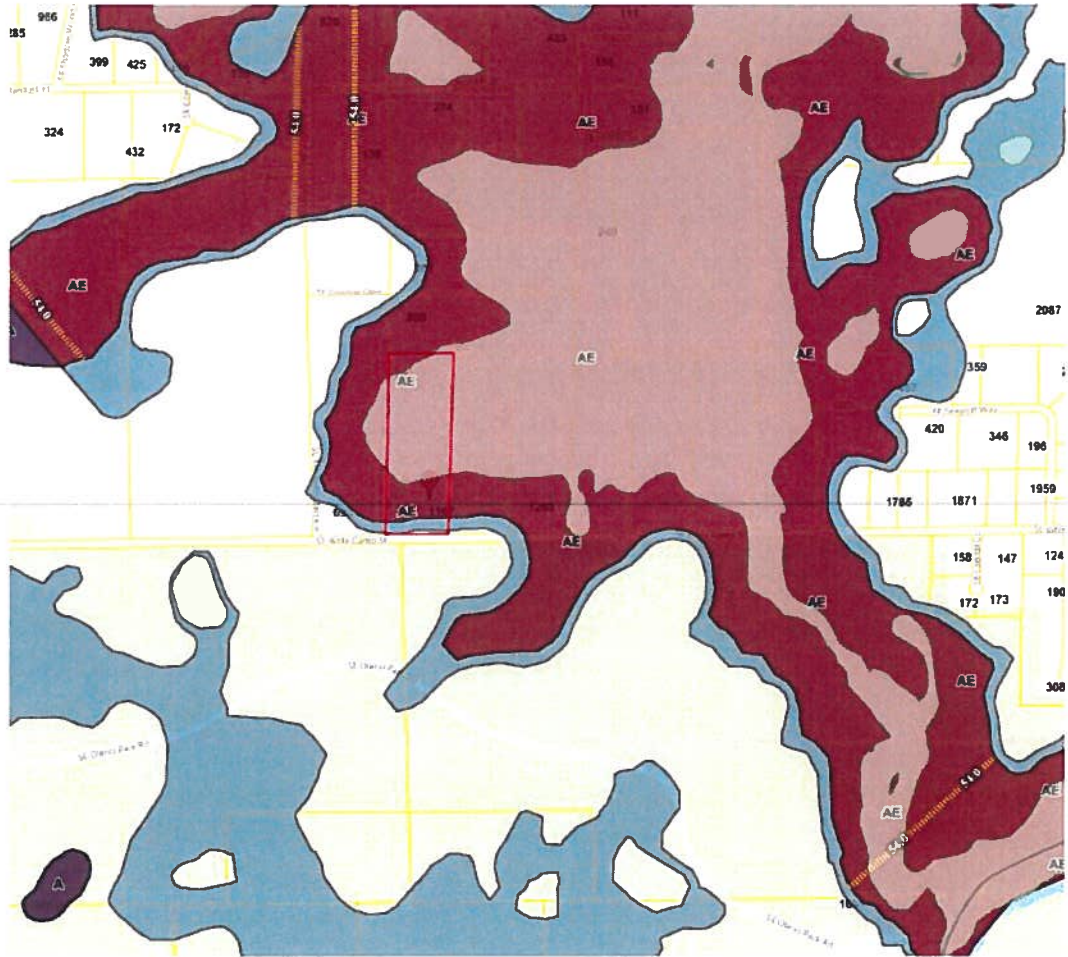
DEFAULT

Base Flood Elevations

Wetlands

Columbia County, FLA - Building & Zoning Property Map

Printed: Thu Apr 06 2017 13:57:17 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 35-6S-17-09859-809

Owner: BEVILLE LESLIE R

Subdivision: HAWKS RIDGE ACRES UNR

Lot:

Acres: 13.8716154

Deed Acres: 13.22 Ac

District: 4 Everett Phillips (386)-758-1005

Future Land Uses: Agriculture - 3, Environmentally Sensitive Areas -1, Recreation

Flood Zones: AE, 0.2 PCT ANNUAL CHANCE FLOOD HAZARD,

Official Zoning Atlas: A-3, ESA-2

Ut, Spoke to Mike
4-6-17 - IF the survey with
elevations shows the home are
it is above BFE then no
one foot rise is needed.

Legend

House Number Labels

Base Flood Elevations

DEFAULT

Base Flood Elevations

Wetlands

Parcels

Flood Zones

0.2 PCT ANNUAL CHANCE

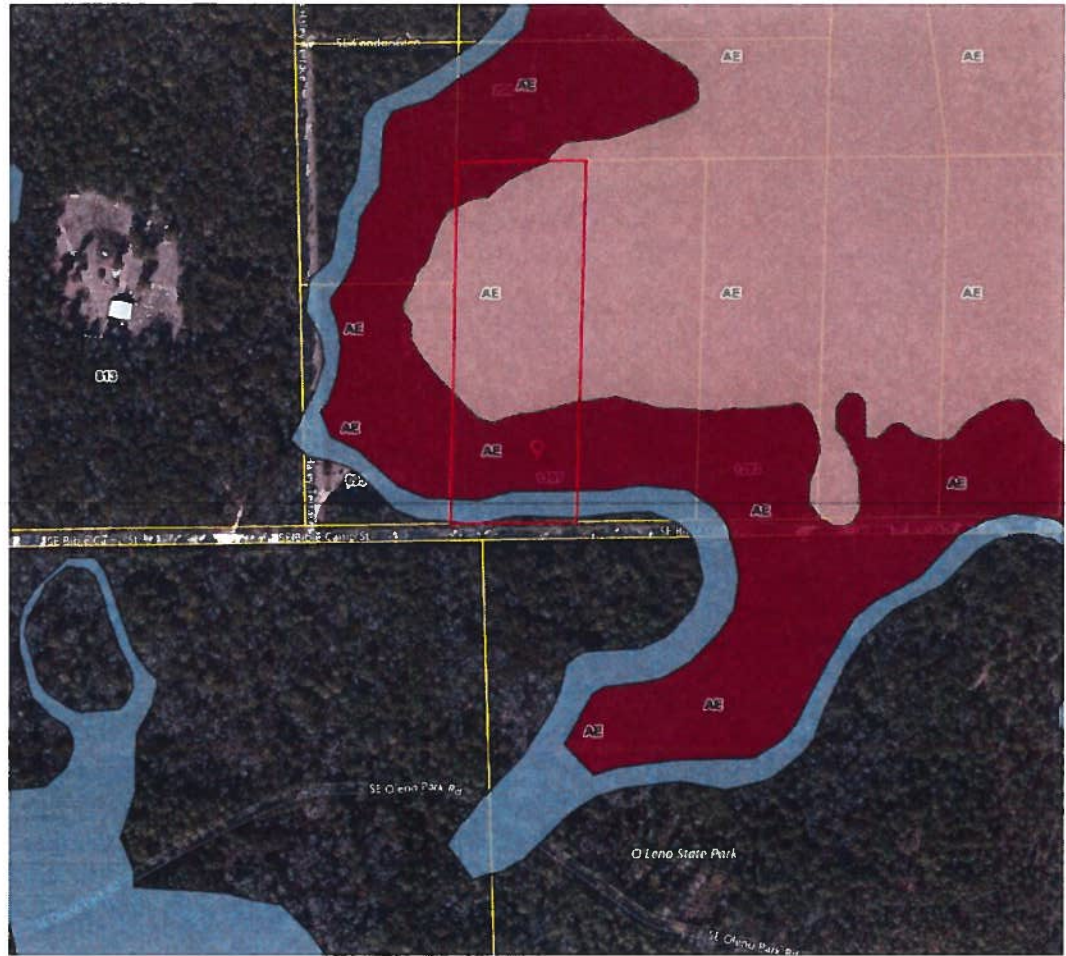
A

AE

AH

Columbia County, FLA - Building & Zoning Property Map

Printed: Thu Apr 06 2017 13:50:39 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 35-6S-17-09859-809

Owner: BEVILLE LESLIE R

Subdivision: HAWKS RIDGE ACRES UNR

Lot:

Acres: 13.8716154

Deed Acres: 13.22 Ac

District: 4 Everett Phillips (386)-758-1005

Future Land Uses: Agriculture - 3, Environmentally Sensitive Areas -1, Recreation

Flood Zones: AE, 0.2 PCT ANNUAL CHANCE FLOOD HAZARD,

Official Zoning Atlas: A-3, ESA-2

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Legend

Parcels

House Number Labels

Base Flood Elevations

DEFAULT

Base Flood Elevations

Wetlands

Future Land Use Map

☐ Mixed Use Development

☐ Light Industrial

☐ Industrial

☒ Highway Interchange

☒ Commercial

☐ Residential High Density

(< 20 d.u. per acre)

☐ Residential Medium/High Density

(< 14 d.u. per acre)

☐ Residential Medium Density

(< 8 d.u. per acre)

☐ Residential Moderate Density

(< 4 d.u. per acre)

☐ Residential Low Density

(< 2 d.u. per acre)

☐ Residential Very Low Density

(< 1 d.u. per acre)

☐ Agriculture - 3

(< 1 d.u. per 5 acres)

☐ Agriculture - 2

(< 1 d.u. per 10 acres)

☐ Agriculture - 1

(< 1 d.u. per 20 acres)

☒ Environmentally Sensitive Areas

(< 1 d.u. per 10 acres)

☐ Public

☐ Recreation

☐ Conservation

Official Zoning Atlas

☐ Others

☐ A-1

☐ A-2

☐ A-3

☐ CG

☐ CHI

☐ CI

☐ CN

☐ CSV

☐ ESA-2

☐ I

☐ ILW

☐ MUD-1

☐ PRD

☒ PRRD

☐ RMF-1

☐ RMF-2

☐ RO

☒ RR

☒ RSF-1

☒ RSF-2

☒ RSF-3

☐ RSF/MH-1

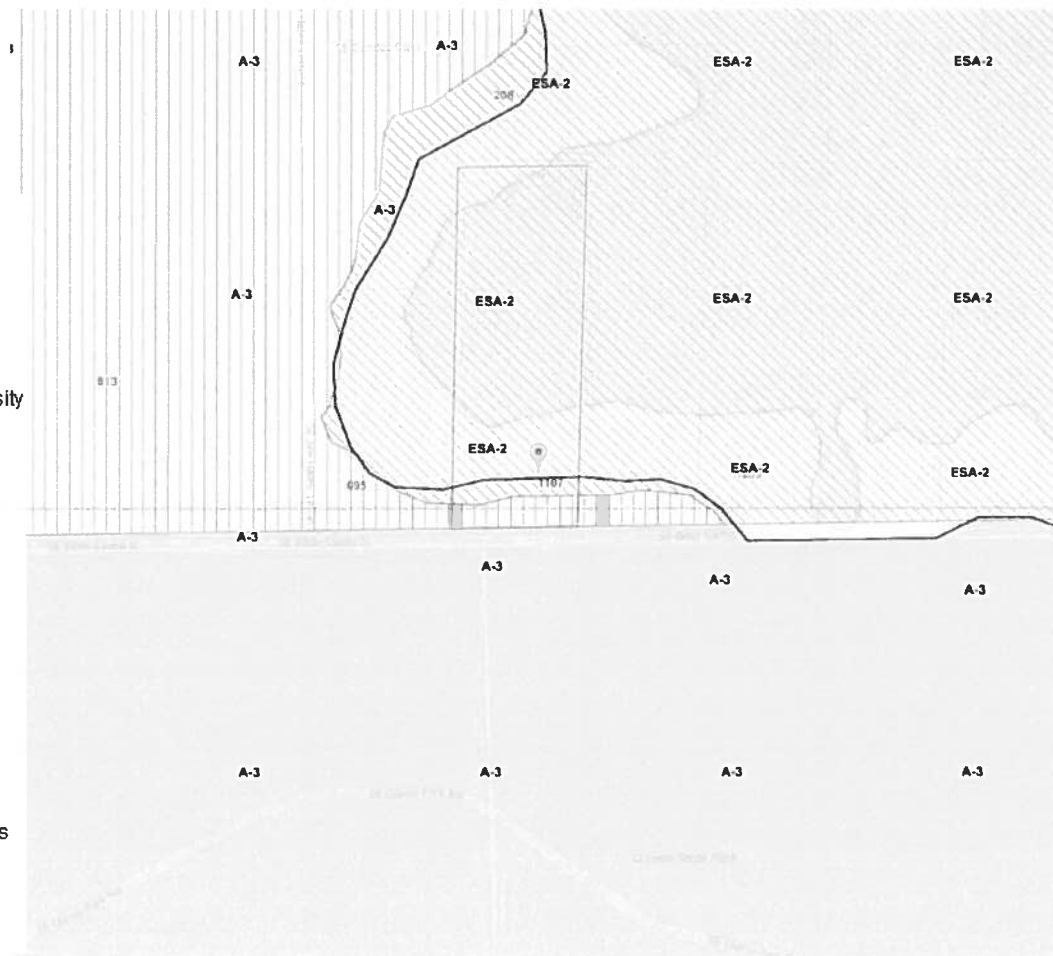
☒ RSF/MH-2

☒ RSF/MH-3

DEFAULT

Columbia County, FLA - Building & Zoning Property Map

Printed: Thu Apr 06 2017 13:53:16 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 35-6S-17-09859-809

Owner: BEVILLE LESLIE R

Subdivision: HAWKS RIDGE ACRES UNR

Lot:

Acres: 13.8716154

Deed Acres: 13.22 Ac

District: 4 Everett Phillips (386)-758-1005

Future Land Uses: Agriculture - 3, Environmentally Sensitive Areas -1, Recreation

Flood Zones: AE, 0.2 PCT ANNUAL CHANCE FLOOD HAZARD,

Official Zoning Atlas: A-3, ESA-2

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Mark Disosway, P.E.
POB 868, Lake City, FL 32056, Ph 386-754-5419, Fax 386-754-6749

One Foot Rise Analysis and Certification, 100 Year Base Flood

LESLIE BEVILLE RESIDENCE, Lot 9, Hawks Ridge Acres Unrec, Bible Camp Rd, Columbia County, FL

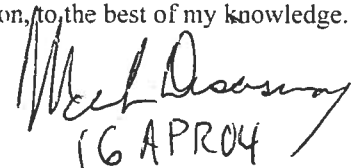
- ☐ PROPERTY DESCRIPTION: Lot 9 Hawks Ridge Acres Unrec, 1107 SE Bible Camp St, High Springs, 32643, Tax ID 35-6S-17-09859-809 Columbia County, Florida.
- ☐ OWNER: Leslie Beville
- ☐ CONTRACTOR: owner
- ☐ PROJECT: A mobile home on CMU piers on natural grade with no added fill. A 14' x 57' mobile home on no more than 50 - 16"x16" CMU piers on natural grade with no added fill.
- ☐ BASE FLOOD ELEVATION: 55' (Per Britt Surveying WO#14702, Flood Insurance Rate Map, Dated 06Jan88 Community Panel No. 120070 0280 B.)
- ☐ FLOOD ZONE: AE
- ☐ BASIN AREA AT BASE FLOOD ELEVATION: n/a Acres (Calculated from FIRM flood plain data.)
- ☐ PROPOSED BUILDING AREA: Piers 80 * 16" * 16" = 89 ft2.
- ☐ PROPOSED BUILDING VOLUME BELOW FLOODPLAIN: (Piers) 89 ft2 x 0' = 89 ft3.
- ☐ EXISTING GRADE ELEVATION AT BUILDING LOCATION: 54.5' average for one foot rise calculations. (Note: Existing grade at mobile home site was established at mobile home location drawn on septic permit application number 04-0214N (left front corner 130' from front and 265' from left side) using topo lines on Britt WO#14702.)
- ☐ CALCULATIONS: The project only requires volume calculations in this area since it is not a flowing or riverine area.

Floodplain volume removed = 89 ft3

Floodplain level increase = (89 ft3) / 43560 ft²/acre / 647 acres = 0.000003 ft

CERTIFICATION:

I hereby certify that construction of LESLIE BEVILLE RESIDENCE, Lot 9, Hawks Ridge Acres Unrec, Bible Camp Rd, Columbia County, FL will increase flood elevations less than one foot at the project location, to the best of my knowledge.


16 APR 04

Mark D. Disosway III



COLUMBIA COUNTY BUILDING DEPARTMENT RESIDENTIAL CHECK LIST

WIFE

MINIMUM PLAN REQUIREMENTS: FLORIDA BUILDING CODE RESIDENTIAL 2014 EFFECTIVE 1 JULY 2015 AND THE NATIONAL ELECTRICAL CODE 2011 EFFECTIVE 1 JULY 2015

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

ALL BUILDING PLANS MUST INDICATE COMPLIANCE WITH THE CURRENT 2014 FLORIDA BUILDING CODES RESIDENTIAL, EFFECTIVE 1 JULY 2015. NATIONAL ELECTRICAL CODE 2011 EFFECTIVE 1 JULY 2015. 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 FLORIDA BUILDING CODE FIGURE 1609-A THROUGH 1609-C ULTIMATE DESIGN WIND SPEEDS FOR RISK CATEGORY AND BUILDINGS AND OTHER STRUCTURES
Revised 12/2016

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

Items to Include-
Each Box shall be
Marked as
Applicable

Select From the Dropdown

1	Two (2) complete sets of plans containing the following:	- YES		
2	All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void	- YES		
3	Condition space (Sq. Ft.)	YES	NO	N/A

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:

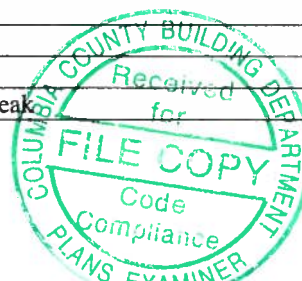
4	Dimensions of lot or parcel of land	- YES		
5	Dimensions of all building set backs	- YES		
6	Location of all other structures (include square footage of structures) on parcel, existing or proposed well and septic tank and all utility easements.	- YES		
7	Provide a full legal description of property.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

Wind-load Engineering Summary, calculations and any details are required.

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

Elevations Drawing including:

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



Floor Plan including:

20	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	- YES
21	Raised floor surfaces located more than 30 inches above the floor or grade	- YES
22	All exterior and interior shear walls indicated	- YES
23	Shear wall opening shown (Windows, Doors and Garage doors)	- YES
24	Show compliance with Section FBCR 310 Emergency escape and rescue opening shown in each bedroom (net clear opening shown) and Show compliance with Section FBC 1405.13.2 where the opening of an operable window is located more than 72 inches above the finished grade or surface below, the lowest part of the clear opening of the window shall be a minimum of 24 inches above the finished floor of the room in which the window is located. Glazing between the floor and 24 inches shall be fixed or have openings through which a 4-inch-diameter sphere cannot pass.	- YES
25	Safety glazing of glass where needed	- N/A
26	Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 and chapter 24 of FBCR)	- N/A
27	Show stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails	- YES
28	Identify accessibility of bathroom (see FBCR SECTION 320)	- YES

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 plans (see Florida product approval form)

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Marked as Applicable
---	--	---

FBCR 403: Foundation Plans

YES / NO / N/A

Select From the Dropbox

29	Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing.	- N/A
30	All posts and/or column footing including size and reinforcing	- YES
31	Any special support required by soil analysis such as piling.	- N/A
32	Assumed load-bearing value of soil 2000 Pound Per Square Foot	- YES
33	Location of horizontal and vertical steel, for foundation or walls (include # size and type) For structures with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an grounding electrode system. Per the National Electrical Code article 250.52.3	- N/A

FBCR 506: CONCRETE SLAB ON GRADE

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

FBCR 318: 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	- YES
----	--	-------

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	- N/A
38	Show all Lintel sizes, type, spans and tie-beam sizes and spacing of reinforcement	- N/A

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	- N/A
----	---	-------

40	Show conventional floor joist type, size, span, spacing and attachment to load bearing walls, stem walls and/or piers	- YES
41	Girder type, size and spacing to load bearing walls, stem wall and/or piers	- YES
42	Attachment of joist to girder	- YES
43	Wind load requirements where applicable	- YES
44	Show required under-floor crawl space	- YES
45	Show required amount of ventilation opening for under-floor spaces	- N/A
46	Show required covering of ventilation opening	- N/A
47	Show the required access opening to access to under-floor spaces	- N/A
48	Show the sub-floor structural panel sheathing type, thickness and fastener schedule on the edges & intermediate of the areas structural panel sheathing	- YES
49	Show Draftstopping, Fire caulking and Fire blocking	- YES
50	Show fireproofing requirements for garages attached to living spaces, per FBCR section 302.6	- N/A
51	Provide live and dead load rating of floor framing systems (psf).	- YES

FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION

YES / NO / N/A

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Marked as Applicable
--	--	---

Select From the Dropdown

52	Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls	- YES
53	Fastener schedule for structural members per table IRC 602.3 are to be shown	- YES
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	- YES
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	- YES
56	Show sizes, type, span lengths and required number of support jack studs, king studs for shear wall opening and girder or header per IRC Table 502.5 (1)	- YES
57	Indicate where pressure treated wood will be placed	- YES
58	Show all wall structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing edges & intermediate areas	- YES
59	A detail showing gable truss bracing, wall balloon framing details or/ and wall hinge bracing detail	- YES

FBCR :ROOF SYSTEMS:

60	Truss design drawing shall meet section FBCR 802.1.6.1 Wood trusses	- N/A
61	Include a layout and truss details, signed and sealed by Florida Professional Engineer	- N/A
62	Show types of connector's assemblies' and resistance uplift rating for all trusses and rafters	- YES
63	Show gable ends with rake beams showing reinforcement or gable truss and wall bracing details	- N/A
64	Provide dead load rating of trusses	- N/A

FBCR 802:Conventional Roof Framing Layout

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

FBCR 803 ROOF SHEATHING

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

ROOF ASSEMBLIES FRC Chapter 9

71	Include all materials which will make up the roof assemblies covering	- YES
72	Submit Florida Product Approval numbers for each component of the roof assemblies covering	- YES

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, N1100.1.1.1 As an alternative to the computerized Compliance Method A, the Alternate Residential Point System Method hand calculation, Alternate Form 600A, may be used. All requirements specific to this calculation are located in Sub appendix C to Appendix G. Buildings complying by this alternative shall meet all mandatory requirements of this chapter. Computerized versions of the Alternate Residential Point System Method shall not be acceptable for code compliance.**

YES / NO / N/A

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Marked as Applicable
		Select From the Dropbox
73	Show the insulation R value for the following areas of the structure	- YES
74	Attic space	- N/A
75	Exterior wall cavity	- YES
76	Crawl space	- YES

HVAC information

77	Submit two copies of a Manual J sizing equipment or equivalent computation study	- N/A
78	Exhaust fans shown in bathrooms Mechanical exhaust capacity of 50 cfm intermittent or 20 cfm continuous required	- YES
79	Show clothes dryer route and total run of exhaust duct	- YES

Plumbing Fixture layout shown

80	All fixtures waste water lines shall be shown on the foundation plan	- YES
81	Show the location of water heater	- YES

Private Potable Water

82	Pump motor horse power	-
83	Reservoir pressure tank gallon capacity	-
84	Rating of cycle stop valve if used	-

MIKE

Electrical layout shown including

85	Show Switches, receptacles outlets, lighting fixtures and Ceiling fans	- YES
86	Show all 120-volt, single phase, 15- and 20-ampere branch circuits outlets required to be protected by Ground-Fault Circuit Interrupter (GFCI) Article 210.8 A	- YES
87	Show the location of smoke detectors & Carbon monoxide detectors	- YES
88	Show service panel, sub-panel, location(s) and total ampere ratings	- YES
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. For structures with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an Grounding electrode system. Per the National Electrical Code article 250.52.3	- YES
90	Appliances and HVAC equipment and disconnects	- N/A
91	Show all 120-volt, single phase, 15- and 20-ampere branch circuits supplying outlets installed in dwelling unit family rooms, dining rooms, living rooms, parlors, libraries, dens, bedrooms, sunrooms, recreation rooms, closets, hallways, or similar rooms or areas shall be protected by a listed Combination arc-fault circuit interrupter, Protection device.	- YES

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Marked as Applicable
THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS		YES / NO / N/A Select From the Dropbox
92	Building Permit Application A current Building Permit Application is to be completed, by following the Checklist all supporting documents must be submitted. There is a \$15.00 application fee. The completed application with attached documents and application fee can be mailed.	- YES
93	Parcel Number The parcel number (Tax ID number) from the Property Appraisers Office (386) 758-1083 is required. A copy of property deed is also requested. www.columbiacountyfla.com	- YES
94	Environmental Health Permit or Sewer Tap Approval A copy of a approved Columbia County Environmental Health (386) 758-1058	- N/A
95	City of Lake City A permit showing an approved waste water sewer tap 386-752-2031	- N/A
96	Toilet facilities shall be provided for all construction sites	- YES
97	Town of Fort White (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.	- N/A
98	Flood Information: 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.	- N/A
99	CERTIFIED FINISHED FLOOR ELEVATIONS will be required on any project where the approved FIRM Flood Maps show the property is in a AE, Floodway, and AH flood zones. Additionally One Foot Rise letters are required for AE and AH zones. In the Floodway Flood Zones a Zero Rise letter is required.	- N/A
100	A Flood development permit is also required for AE, Floodway & AH. Development permit cost is \$50.00	- N/A
101	Driveway Connection: If the property does not have an existing access to a public road, then an application for a culvert permit (\$25.00) must be made. County Public Works Dept. determines the size and length of every culvert before instillation and completes a final inspection before permanent power is granted. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver (\$50.00). If the project is to be located on an F.D.O.T. maintained road, then an F.D.O.T. access permit is required.	- N/A
102	911 Address: An application for a 911 address must be applied for and received through the Columbia County Emergency Management Office of 911 Addressing Department (386) 758-1125.	- N/A

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. ☐

Section R101.2.1 of the Florida Building Code Residential:

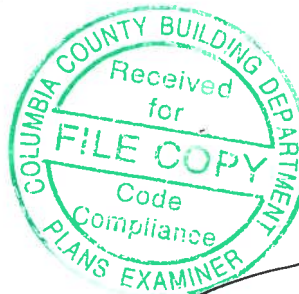
The provisions of Chapter 1, Florida Building Code shall govern the administration and enforcement of the Florida Building Code, Residential.

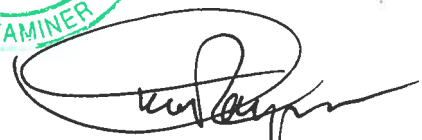
VICTOR RAYMOS ARCHITECT INC.

3/25/2017

**WIND LOAD ANALYSIS
Per ASCE 7**

**BEVILLE RESIDENCE
1107 SE BIBLE CAMP ROAD
HIGH SPRINGS, FL 32694**




3.30.17

ALLOWABLE UNIT SHEAR ON WOOD STUD SHEARWALLS 322 PLF (.322 Kips)

SHEAR PERPENDICULAR TO RIDGE 3 Kips

SHEAR PARALLEL TO RIDGE 3.6 Kips

SHEAR FORCES PERPENDICULAR AND PARALLEL TO RIDGE ARE RESISTED WITH THE REQUIRED AMOUNT OF SHEARWALL. See construction documents for shearwall locations.

ROOF FRAMING : 2X8 WOOD RAFTERS @ 16" O.C..

ROOF SHEATHING: 7/16" or 15/32" Exterior plywood or OSB. Fasten with 8d/ .113 ring shank nails.

Interior zone spacing: Interior 6 inches-- Periphery 3 inches

Edge and end zone spacing: Interior 6 inches—Periphery 3 inches

SHEARWALL SIDING: (@ Exterior face gable end) 7/16" or 15/32" Exterior plywood or OSB.

Spacing: Interior 8 inches-- Edge 3 inches

Fasten with 8d/.131 ring shank nails.

LOAD TRANSFER FASTENERS (Simpson or equal)


Anchor 2x8 rafters to top exterior wall dbl plates w/ Simpson H2.5's . Anchor 2x8 rafters to ridge beam w/ simpson LSSU210 Adjustable hangers. Use LSSU12.06 if rafters are actual 2" wide rough cut members.

Anchor ridge beam to center wood column with blocking , (2) 1/2" anchor bolts (see construction documents detail in section 1/A4) and (2) 16" MSTAM Straps.

At exterior stud wall connections to floor girders, lap plywood 11.5" over girders and at least 2' above joint, or use 24" MSTAM straps at 48" o.c. From girders to studs.

STUDS: 2X4 spruce, grade #1 or #2 . Exterior spacing 16" o.c.. . Provide balloon framing at gable ends.

1. All rafters must bear on exterior walls .
2. All walls to be nailed with the same patterns as shearwalls.
4. This windload is not valid without a raised embossed seal.
5. It is assumed that soil conditions will support a minimum 2000 psf.
6. Fiber mesh or WWM may be used in concrete slab.
7. Deleted.
8. Wind design and analysis is valid for one use only.
9. All headers over 12' span must be pre-engineered.
10. Any discrepancies in this wind load shall be brought to the attention of the architect before proceeding with construction.



3.20.17 2

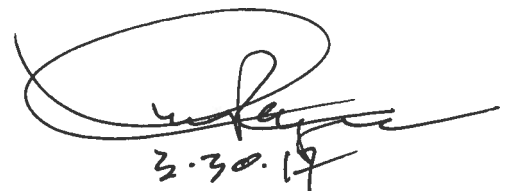
skill ordinarily exercised by members of the same profession currently practicing under similar circumstances. Upon written notice to the Consultant prior to three months after completion of Services, and by mutual agreement between the Consultant and Client, the Consultant will correct those services not meeting such a standard without additional compensation. This Warranty and Standard of Care is in lieu of all other warranties and standards of care. No other warranty or standard of care, express or implied, including warranties of merchantability and fitness for a particular purpose is made or intended by the proposal, by oral communication or by any representations made regarding the services included in this agreement.

LIMITATION OF LIABILITY – Consultant and Client mutually agree that the services provided pursuant to this Agreement involve risks of liability, which cannot be adequately compensated for by the payments Client will make under this Agreement. Therefore, the total cumulative liability of Consultant, its agents, employees and subcontractors whether in contract, tort including negligence (whether sole or concurrent) and strict liability, or otherwise arising out of, connected with or resulting from the services providing pursuant to this Agreement shall not exceed the total fees paid by Client. Client is advised to carefully review Client's risks of liability related to this contract and address such risks through Client's insurance or other means.

DISCLAIMER OF CONSEQUENTIAL DAMAGES – In no event shall Consultant or Client be liable to the other for any special, indirect, incidental or consequential loss or damages, including lost profits and loss of use.

Acceptance of this WIND LOAD document for a project use, confirms that the client is aware of the Limits of Liability listed herein and is in agreement with them.

Victor Raymos Architect



3.30.17

MeCaWind Std v2.2.7.0 per ASCE 7-10

Developed by MECA Enterprises, Inc. Copyright

Date	: 3/25/2017	Project No.	: 440
Company Name	: Victor Raymos Architect	Designed By	: Victor Raymos Architect
Address	: 4825 SW 19th Street	Description	: Residence
City	: Gainesville	Customer Name	: Beville
State	: FL	Proj Location	: 1107 SE Bible Camp Rd, High Sp

Input Parameters: Directional Procedure All Heights Building (Ch 27 Part 1)

Basic Wind Speed(V)	= 130.00 mph	Exposure Category	= B
Structural Category	= II	Flexible Structure	= No
Natural Frequency	= N/A	Kd Directional Factor	= 0.85
Importance Factor	= 1.00	Zg	= 1200.00 ft
Alpha	= 7.00	Bt	= 0.84
At	= 0.14	Bm	= 0.45
Am	= 0.25	l	= 320.00 ft
Cc	= 0.30	Zmin	= 30.00 ft
Epsilon	= 0.33	Slope of Roof(Theta)	= 14.04 Deg
Pitch of Roof	= 3 : 12	Type of Roof	= GABLED
h: Mean Roof Ht	= 12.50 ft	Eht: Eave Height	= 11.00 ft
RHt: Ridge Ht	= 14.00 ft	Overhead Type	= Overhang
OH: Roof Overhang at Eave	= 1.33 ft	Bldg Width Across Ridge	= 24.00 ft
Bldg Length Along Ridge	= 24.00 ft		

Gust Factor Calculations

Gust Factor Category I Rigid Structures - Simplified Method

Gust1: For Rigid Structures (Nat. Freq.>1 Hz) use 0.85 = 0.85

Gust Factor Category II Rigid Structures - Complete Analysis

Zm: $0.6 \cdot H_t$ = 30.00 ft

lzm: $C_c \cdot (33/Z_m)^{0.167}$ = 0.30

Lzm: $1 \cdot (Z_m/33)^{\text{Epsilon}}$ = 309.99 ft

Q: $(1/(1+0.63 \cdot ((B+H_t)/L_z)^{0.63}))^{0.5}$ = 0.93

Gust2: $0.925 \cdot ((1+1.7 \cdot l_z \cdot 3.4 \cdot Q)/(1+1.7 \cdot 3.4 \cdot l_z))$ = 0.88

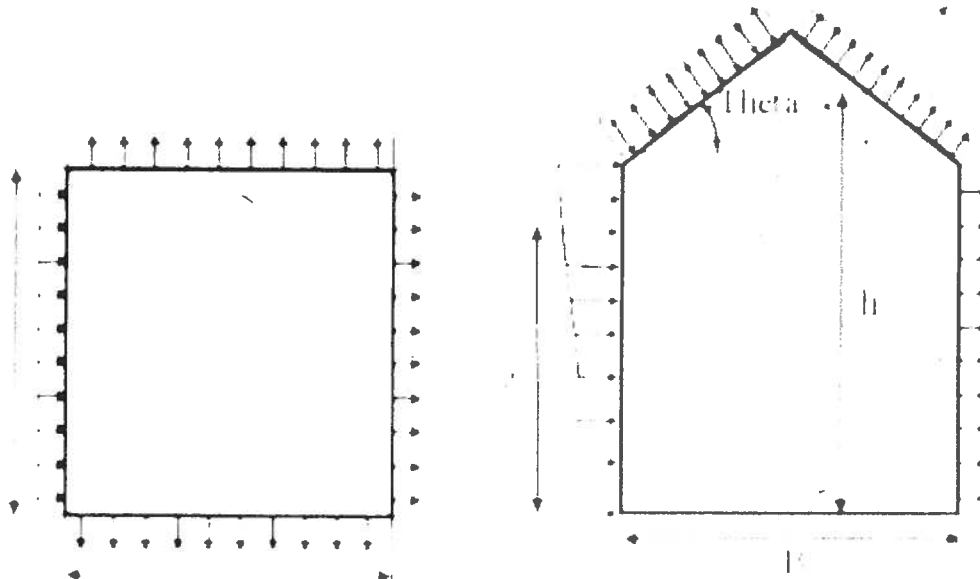
Gust Factor Summary

Not a Flexible Structure use the Lessor of Gust1 or Gust2 = 0.85

Table 26.11-1 Internal Pressure Coefficients for Buildings, GCpi

GCpi : Internal Pressure Coefficient = +/-0.18

Wind Pressurs Main Wind Force Resisting System (MWFRS) - Ref Figure 27.4-1



Kh: $2.01 \cdot (H_t/Z_g)^{(2/\text{Alpha})}$

= 0.57

Kht: Topographic Factor (Figure 6-4) = 1.00
 Qh: $.00256 \cdot (V)^2 \cdot I \cdot K_h \cdot K_{ht} \cdot K_d$ = 12.68 psf
 Cpww: Windward Wall Cp (Ref Fig 6-6) = 0.80
 Roof Area = 659.53 ft²
 Reduction Factor based on Roof Area = 0.85

MWFRS-Wall Pressures for Wind Normal to 24 ft Wall (Normal to Ridge)

Wall	Cp	Pressure +GCpi (psf)	Pressure -GCpi (psf)
Leeward Wall	-0.50	-7.67	-3.11
Side Walls	-0.70	-9.83	-5.26

Wall	Elev ft	Kz	Kzt	Cp	qz psf	Press +GCpi	Press -GCpi	Total +/-GCpi
Windward	11.00	0.57	1.00	0.80	12.68	6.34	10.91	14.01
Windward	1.00	0.57	1.00	0.80	12.68	6.34	10.91	14.01

Roof Location	Cp	Pressure +GCpi (psf)	Pressure -GCpi (psf)
Windward - Min Cp	-0.75	-10.37	-5.80
Windward - Max Cp	-0.18	-4.22	0.34
Leeward Norm to Ridge	-0.50	-7.67	-3.11
Overhang Top (Windward)	-0.75	-8.08	-8.08
Overhang Top (Leeward)	-0.50	-5.39	-5.39
Overhang Bot (Windward only)	0.80	8.62	8.62

Notes - Normal to Ridge

- Note (1) Per Fig 27.4-1 Note 7, Since Theta > 10° Deg base calcs on Mean Ht
 Note (2) Wall & Roof Pressures = $Q_h \cdot (G \cdot C_p - GC_{pi})$
 Note (3) +GCpi = Positive Internal Bldg Press, -GCpi = Negative Internal Bldg Press
 Note (4) Total Pressure = Leeward Press + Windward Press (For + or - GCpi)
 Note (5) Ref Fig 27.4-1, Normal to Ridge (Theta ≥ 10°), Theta = 14.0 Deg, h/l = 0.52
 Note (6) No internal pressure considered (GCpi = 0) for Overhang
 Note (7) Overhang bottom based upon windward wall Cp and GCpi = 0.

MWFRS-Wall Pressures for Wind Normal to 24 ft wall (Along Ridge)

Wall	Cp	Pressure +GCpi (psf)	Pressure -GCpi (psf)
Leeward Wall	-0.50	-7.67	-3.11
Side Walls	-0.70	-9.83	-5.26

Wall	Elev ft	Kz	Kzt	Cp	qz psf	Press +GCpi	Press -GCpi	Total +/-GCpi
Windward	14.00	0.57	1.00	0.80	12.68	6.34	10.91	14.01
Windward	11.00	0.57	1.00	0.80	12.68	6.34	10.91	14.01
Windward	1.00	0.57	1.00	0.80	12.68	6.34	10.91	14.01

Roof - Dist from Windward Edge	Cp	Pressure +GCpi (psf)	Pressure -GCpi (psf)
Roof: 0.0 ft to 6.3 ft	-0.91	-12.07	-7.51
Roof: 6.3 ft to 12.5 ft	-0.89	-11.89	-7.33
Roof: 12.5 ft to 24.0 ft	-0.51	-7.76	-3.20
OH Top : 0.0 ft to 6.3 ft	-0.91	-14.36	-14.36
Overhang Top : 6.3 ft to 12.5 ft	-0.89	-14.18	-14.18
Overhang Top : 12.5 ft to 24.0 ft	-0.51	-10.04	-10.04

Notes - Along Ridge

- Note (1) OH = Overhang, no internal pressure considered for Overhang (GCpi=0)
 Note (2) Ref Fig 27.4-1, Parallel to Ridge (All), h/l = 0.52

		Maximum Header Span (ft.)					
		3'	6'	9'	12'	15'	18'
		Number of Header Studs Supporting End of Header					
		1	1	2	2	2	2
Unsupported Wall Height	Stud Spacing	Number of Full-Length Studs at Each End of Header					
10' or less	12 in.	2	2	3	3	3	3
	16 in.	2	2	3	3	3	3
	24 in.	1	2	2	2	2	2
greater than 10'	12 in.	2	2	3	4	5	5
	16 in.	2	2	3	3	4	4
	24 in.	1	2	2	2	3	3

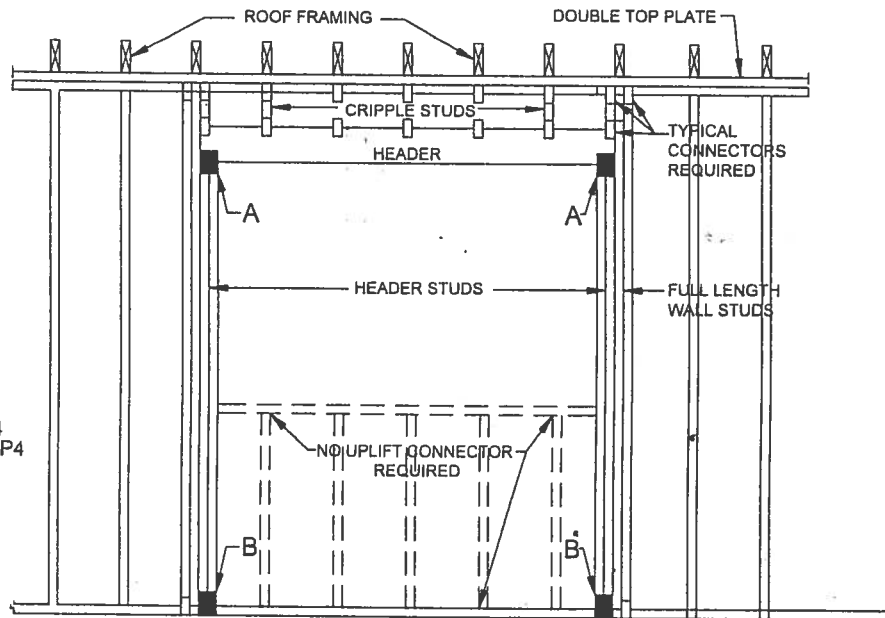
1. The header stud shall not be required if the header is supported by a suitable framing anchor.

Uplift connection
Requirement at points A & B

NOTE. Uplift connection IS required at each end of header and at bottom of header studs in addition to connectors at wall studs and at top and bottom of cripples.

All Simpson or equal.

At A : simpson MSTA21
At B : simpson RSP4 per stud
At Top of cripples : Simpson RSP4
At bottom of cripples: Simpson RSP4





FAX COVER SHEET

DATE: 4/10/2017

TO: Lake City Building Dept

RE: Lori

FAX: 386-758-2160

FROM: Deanna Webb

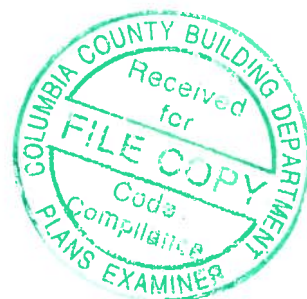
FAX: 386-454-0395

NUMBER OF PAGES, INCLUDING COVER SHEET: 14

MESSAGE:

Window and door Product approval for

Robert Beville
1107 SE Bible Baptist Camp St




DATE: 8/25/14
SCALE: N.T.S.
DWG. BY: AL
CHK. BY: CFS
DRAWING NO.: FL-17184.21
SHEET 7 OF 7

REVISIONS
NO. DATE
1 04/22/15 UPDATE TO 5TH ED. (2014) FRC

BILL OF MATERIALS & COMPONENTS
PART OR ASSEMBLY
FIBERGLASS DOOR
PRODUCT: PLASTPRO

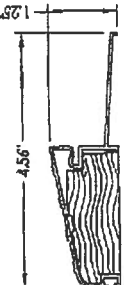
Documents prepared by: L.F. Schmidt
P.E. No. 43409
L.F. Schmidt
Professional Engineer
P.O. Box 230, Vero Beach, FL 33595
Phone No.: 813.859.9187
Page C.A. No. 8813

21 HEAD & SIDE
Poly fiber joint



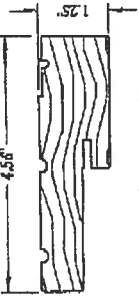
0.75"
4.56"
1.25"

31 OUTSWING THRESHOLD
GOSH



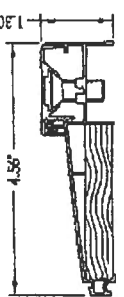
1.25"
4.56"

20 HEAD & SIDE
Xmb



1.25"
4.56"

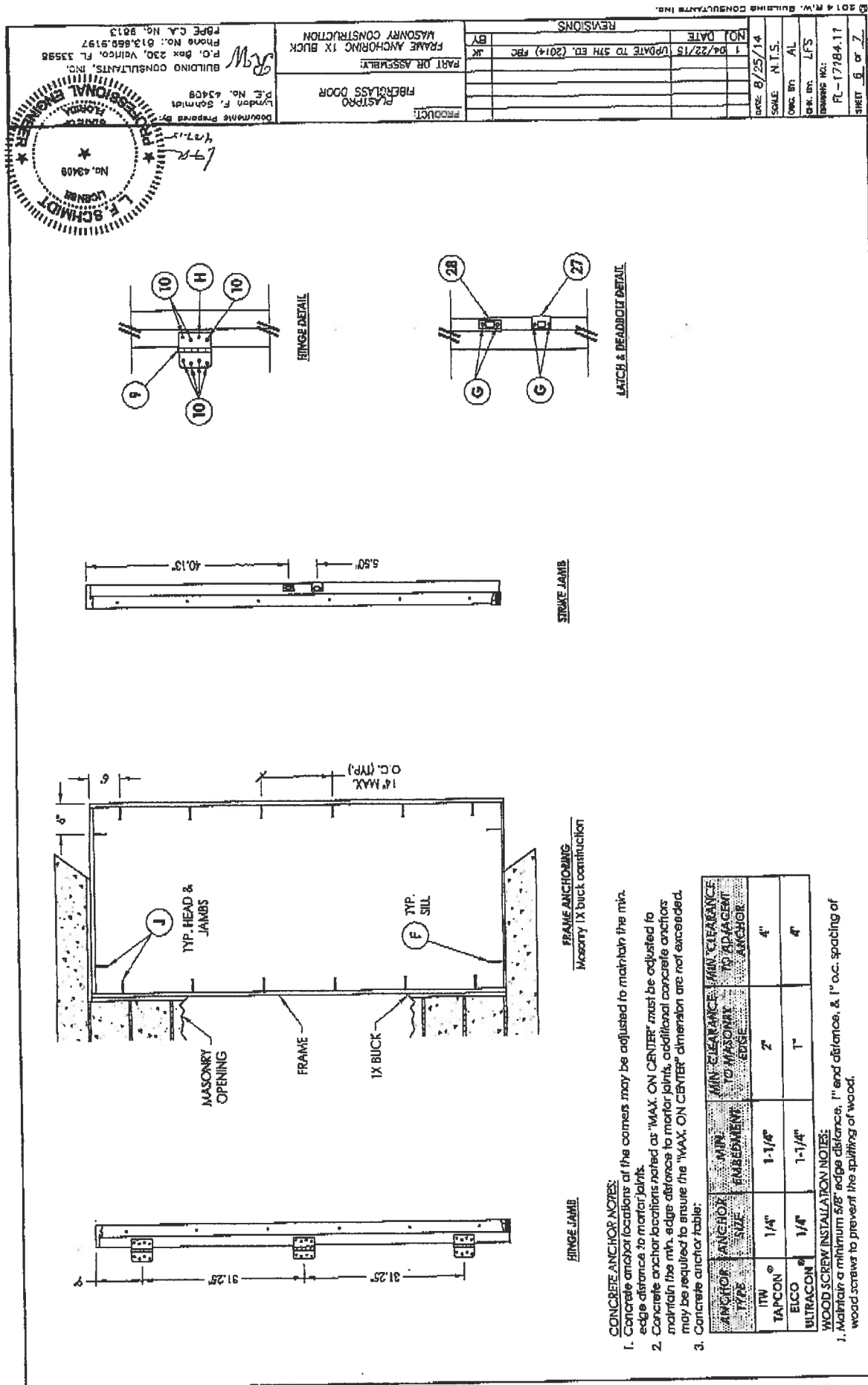
30 INSWING THRESHOLD
RCS



1.30"
4.56"

ITEM	DESCRIPTION	MATERIAL
A	1X BUCK SG >= 0.55	WOOD
B	2X BUCK SG >= 0.55	WOOD
C	1/4" MAX. SHM SPACE	STEEL
D	1/4" X 2-3/4" PPH ELCO OR ITW CONCRETE SCREW	CONCRETE
E	MASONRY - 3,000 PSI MIN. CONCRETE CONFORMING TO ACI 301 OR HOLLOW BLOCK CONFORMING TO ASTM C90	STEEL
F	1/4" X 2-1/4" PPH ELCO OR ITW CONCRETE SCREW	STEEL
G	3/16" X 3-1/4" PPH ITW CONCRETE SCREW	STEEL
H	1/4" X 3-3/4" PPH ITW CONCRETE SCREW	STEEL
J	1/4" X 3-3/4" PPH ELCO OR ITW CONCRETE SCREW	STEEL
L	#10 X 2-1/2" PPH WOOD SCREW	STEEL
M	#8 X 2-1/2" PPH WOOD SCREW	SILICONE
6	SEALANT	FOAM
7	WEATHERSTRIP	STEEL
9	4" HINGE	STEEL
10	#10 X 3/4" PPH WOOD SCREW	WOOD
20	JAMB FINGER - JOINT - PINE	POLYMER
21	POLYMER COMPOSITE JAMB	STEEL
27	LATCH STRIKE PLATE	STEEL
28	DEADBOLT PLATE	STEEL
30	DOOR SWEEP	ALUM./ WOOD
31	OUTSWING THRESHOLD BY DLP (GOSH)	ALUM./ WOOD
33	INSWING THRESHOLD BY DLP (RCS)	ALUM./ WOOD
40	DOOR PANEL - SEE DOOR PANEL DETAIL SHEET FOR CONSTRUCTION DETAILS	FIBERGLASS
41	DOOR SKIN (MIN. 0.075" THICK) PLAST-PRO/NANTYA PLY = 11,063 PSI MIN.	CELLULAR PVC
42	TOP RAIL	CELLULAR PVC
43	LATCH & HINGE STILE	WOOD
44	REINFORCEMENT WOOD FOR LOCKS	CELLULAR PVC
45	BOTTOM RAIL	POLYURETHANE
46	FOAM CORE	LYL
47	LATCH & HINGE STILE REINFORCEMENT	

Plastro, Inc. PLASTPRO® is a registered trademark of Plastro, Inc. All other trademarks are the property of their respective owners. Drawings/Currents/17184.21-10.dwg, 7.1



9\CLIENTS\PERFORMA Inc PERMANENT Florida Product Approval\FL-171041C - (Drawing)\Current\FL-171041-11-20.dwg, 4.1

17184.11



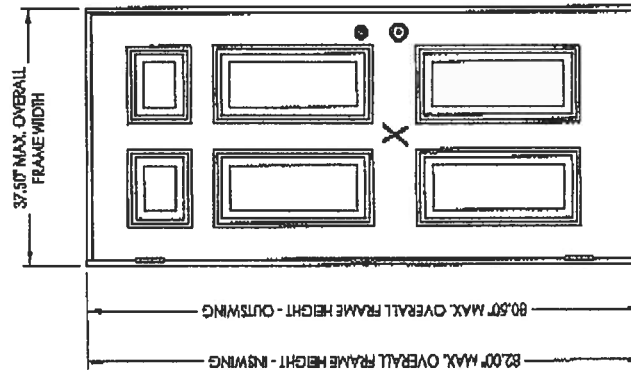
5200 W. CENTURY BLVD.
LOS ANGELES, CA 90045

OPAQUE FIBERGLASS DOOR INSWING / OUTSWING "IMPACT"

GENERAL NOTES

- This product has been evaluated and is in compliance with the 5th Edition (2014) Florida Building Code (FBC) structural requirements excluding the "High Velocity Hurricane Zone" (HVHZ).
- Product anchors shall be as listed and spaced as shown on details. Anchor embedment to base material shall be beyond wall dressing or stucco.
- When used in areas requiring wind borne debris protection this product complies with Section 1609.1.2 of the FBC and does not require an impact resistant covering. This product meets missile level "V" and includes Wind Zone 4 as defined in ASTM E 1996 and Section 1609.1.2.2 of the FBC.
- For 2x stud framing construction, anchoring of these units shall be the same as that shown for 2x buck masonry construction.
- Site conditions that deviate from the details of this drawing require further engineering analysis by a licensed engineer or registered architect.

TABLE OF CONTENTS	
SHEET #	DESCRIPTION
1	Typical elevation, design pressures, & general notes
2	Door panel details
3	Horizontal cross sections
4	Vertical cross sections
5	Buck and frame anchoring - 2x buck masonry construction
6	Frame anchoring - 1x buck masonry construction
7	Bill of materials & components



SWING	DESIGN PRESSURE (psf)	DESIGN WIND SPEED (mph)
INSWING	+65.0	-70.0
OUTSWING	+65.0	-65.0

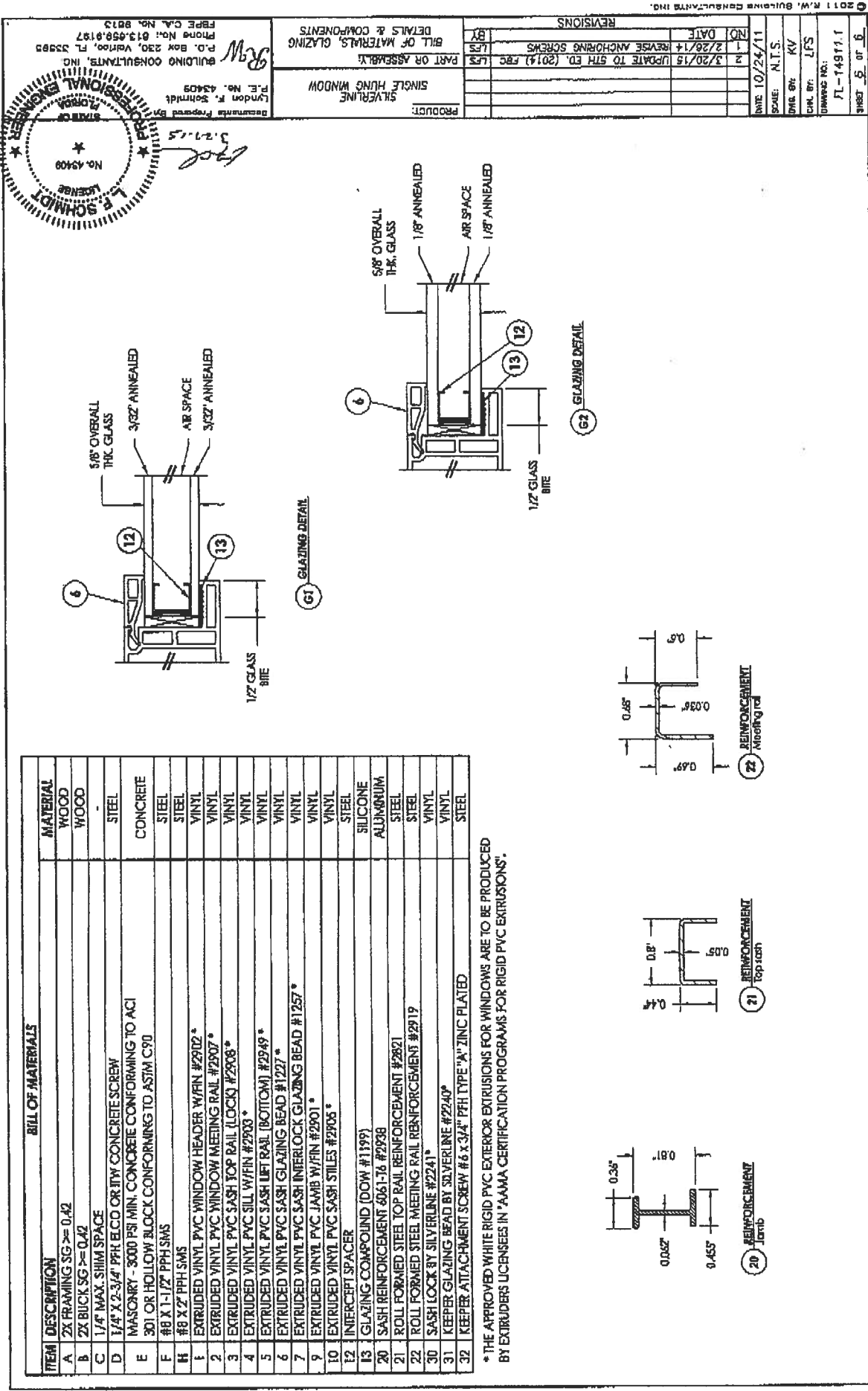
L.F. SCHMIDT
 LICENSED PROFESSIONAL ENGINEER
 No. 43408
 State of Florida

Documents Prepared By: [Signature]
 P.E. No. 43409
 Landon F. Schmidt
 BUILDING CONSULTANTS, INC.
 P.O. Box 230, Vero Beach, FL 33586
 Phone No. 813.658.8197
 FPE O.A. No. 8813

PRODUCT: PLASTPRO
 PART OR ASSEMBLY: FIBERGLASS DOOR
 TYPICAL ELEVATION, DESIGN PRESSURES & GENERAL NOTES

REVISIONS
 NO. DATE BY JK
 1 04/22/13 UPDATE TO 5TH ED. (2014) FBC

DATE: 8/25/14
 SCALE: N.T.S.
 DRAWN BY: AL
 CHECKED BY: LFS
 DRAWING NO.: FL-17184.11
 SHEET 1 of 2



R:\Clients\SEVERINE Building Products - ProFile Products Approval\PL-14911C - Crownings\PL-14911 (2014)\PL-14911-9.dwg 1-3

1 HORIZONTAL CROSS SECTION

2 HORIZONTAL CROSS SECTION

1 VERTICAL CROSS SECTION

2 VERTICAL CROSS SECTION

PLAN VIEW

TABLE 1: SASH REINFORCEMENT (ITEM 20) REQUIRED FOR THE FOLLOWING WINDOW SIZES:

FRAME DIMENSION	DESIGN PRESSURE (PSF)
48" X 72"	+35 / -35
36" X 74"	+50 / -50
36" X 77"	+35 / -35

NOTES:

- SASH REINFORCEMENT (ITEM 20) REQUIRED FOR THE FOLLOWING WINDOW SIZES:

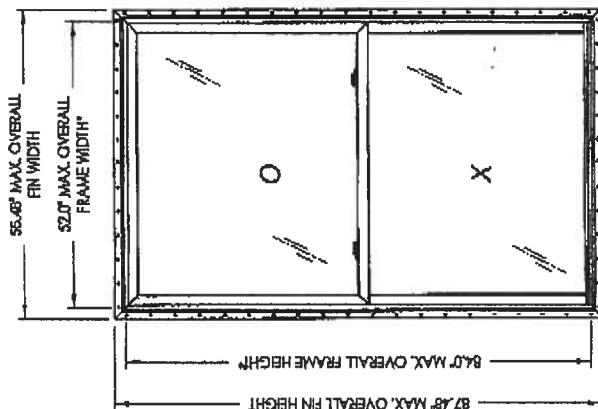
SilverLine[®]
by Andersen
WINDOWS • DOORS

**SERIES 2900/4900 - MODEL 2901/4901
EXTRUDED VINYL SINGLE HUNG
WINDOW w/ NAILING FIN
"NON-IMPACT"**

GENERAL NOTES

1. This product has been evaluated and is in compliance with the 5th Edition (2014) Rankine Building Code (RBC) structural requirements excluding the "High Velocity Hurricane Zone" (HVHZ).
2. Product anchors shall be as listed and spaced as shown on details. Anchor embedment to base material shall be beyond wall dressing at stucco.
3. When used in areas requiring wind borne debris protection this product is required to be protected with an impact resistant covering that complies with Section 1609.1.2 of the RBC.
4. Site conditions that deviate from the details of this drawing require further engineering analysis by a licensed engineer or registered architect.

TABLE OF CONTENTS	
SHEET #	DESCRIPTION
1	Typical elevation, design pressures & general notes
2	Horizontal & vertical cross sections
3	Horizontal & vertical cross sections
4	Buck & frame anchoring
5	Components
6	all of materials, dimensions & components



ITEM NO.	DESCRIPTION	QUANTITY	UNIT	EST. PRICE	TOTAL PRICE	REMARKS
1	1.0000	1.00	sq. ft.	50.00	50.00	
2	2.0000	2.00	sq. ft.	50.00	100.00	
3	3.0000	3.00	sq. ft.	50.00	150.00	
4	4.0000	4.00	sq. ft.	35.00	140.00	
5	5.0000	5.00	sq. ft.	35.00	175.00	
6	6.0000	6.00	sq. ft.	25.00	150.00	
7	7.0000	7.00	sq. ft.	20.00	140.00	

NOTE: Max. overall frame height and width occur on separate units

DATE 10/24/11	SCALE: N.T.S.	UNIT: LVS	CHL. BY: KVS	FL-14911.1	SHEET 1 of 6
DRAWING NO.					
3013 R.W. BUILDING CONSULTANTS INC.					
REVISONS					
NO.	DATE	BY			
1	2/28/14	REVISE ANCHORING SCREWS			
2	3/20/15	UPDATE TO STD ED. (2014) FBC			
PART OR ASSEMBLY		SILVERLINE			
SINGLE HUNG WINDOW		DOCUMENTS REQUIRED BY:			
LONDON F. BOLDMDT		P.E. No. 43409			
P.W.		BUILDING CONSULTANTS, INC.			
P.O. Box 220, Vero Beach, FL 33595		Phone No. 813.658.8187			
FAXE CA. No. 8813					

FLORIDA BUILDING CODE, ENERGY CONSERVATION**Residential Building Thermal Envelope Approach****FORM R402-2014**Climate Zone ☐

Scope: Compliance with Section R402.1.1 of the *Florida Building Code, Energy Conservation*, shall be demonstrated by the use of Form R402 for single- and multiple-family residences of three stories or less in height, additions to existing residential buildings, alterations, renovations, and building systems in existing buildings, as applicable. To comply, a building must meet or exceed all of the energy efficiency requirements on Table R402A and all applicable mandatory requirements summarized in Table R402B of this form. If a building does not comply with this method, or by the UA Alternative method, it may still comply under Section R405 of the *Florida Building Code, Energy Conservation*.

PROJECT NAME:	Beville	BUILDER:	Robert Beville
AND ADDRESS:		PERMITTING OFFICE:	Columbia County, FL
OWNER:	Robert Beville	JURISDICTION NUMBER:	120070
	1107 SE Bible Camp St.	PERMIT NUMBER:	

General Instructions:

1. Fill in all the applicable spaces of the "To Be Installed" column on Table R402A with the information requested. All "To Be Installed" values must be equal to or more efficient than the required levels.
2. Complete page 1 based on the "To Be Installed" column information.
3. Read the requirements of Table R402B and check each box to indicate your intent to comply with all applicable items.
4. Read, sign and date the "Prepared By" certification statement at the bottom of page 1. The owner or owner's agent must also sign and date the form.

1. New construction, addition, or existing building	1. <u>New Construction</u>	
2. Single-family detached or multiple-family attached	2. <u>Single Family Dwelling</u>	
3. If multiple-family, number of units covered by this submission	3. <u>---</u>	
4. Is this a worst case? (yes/no)	4. <u>No</u>	
5. Conditioned floor area (sq. ft.)	5. <u>576</u>	
6. Windows, type and area		
a) U-factor:	6a. <u>.40 Max</u>	
b) Solar Heat Gain Coefficient (SHGC)	6b. <u>.25 Max</u>	
c) Area	6c. <u>60 sq ft</u>	
7. Skylights		
a) U-factor:	7a. <u>N/A</u>	
b) Solar Heat Gain Coefficient (SHGC)	7b. <u>---</u>	
8. Floor type, area or perimeter, and insulation:		
a) Slab-on-grade (R-value)	8a. <u>---</u>	
b) Wood, raised (R-value)	8b. <u>R=0</u>	
c) Wood, common (R-value)	8c. <u>---</u>	
d) Concrete, raised (R-value)	8d. <u>---</u>	
e) Concrete, common (R-value)	8e. <u>---</u>	
9. Wall type and insulation:		
a) Exterior: 1. Wood frame (Insulation R-value)	9a1. <u>R=13</u>	
2. Masonry (Insulation R-value)	9a2. <u>---</u>	
b) Adjacent: 1. Wood frame (Insulation R-value)	9b1. <u>---</u>	
2. Masonry (Insulation R-value)	9b2. <u>---</u>	
10. Ceiling type and insulation		
a) Attic (Insulation R-value)	10a. <u>---</u>	
b) Single assembly (Insulation R-value)	10b. <u>R=38</u>	
11. Air distribution system:		
a) Duct location, insulation	11a. <u>N/A</u>	
b) AHU location	11b. <u>---</u>	
c) Total duct leakage. Test report attached.	11c. <u> </u> cfm/100 s.f. Yes <input type="radio"/> No <input checked="" type="radio"/>	
12. Cooling system: a) type	12a. <u>Window Package Unit</u>	
b) efficiency	12b. <u>---</u>	
13. Heating system: a) type	13a. <u>Window Package Unit</u>	
b) efficiency:	13b. <u>---</u>	
14. HVAC sizing calculation: attached	14. <u>---</u> Yes <input type="radio"/> No <input checked="" type="radio"/>	
15. Water heating system: a) type	15a. <u>Electric</u>	
b) efficiency	15b. <u>40gal=0.92min 50=.090min</u>	

I hereby certify that the plans and specifications covered by this form are in compliance with the *Florida Building Code, Energy Conservation*.

PREPARED BY: Robert Beville Date: 4/4/17

I hereby certify that this building is in compliance with the *Florida Building Code, Energy Conservation*.

OWNER/AGENT: Robert Beville Date: 4/4/17

Review of plans and specifications covered by this form indicate compliance with the *Florida Building Code, Energy Conservation*. Before construction is complete, this building will be inspected for compliance in accordance with Section 553.908, F.S.

CODE OFFICIAL: _____

Date: _____

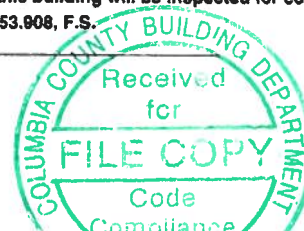


TABLE R402.1.1
INSULATION AND FENESTRATION REQUIREMENTS BY COMPONENT^a

LOCATION ^{b,1}	SKYLIGHT ^b U-FACTOR	GLAZED FENESTRATION SHGC ^{b,2}	CEILING R-VALUE	WOOD FRAME WALL R-VALUE	MASS WALL R-VALUE ⁱ	FLOOR R-VALUE	BASEMENT ^c WALL R-VALUE	SLAB ^d R-VALUE & DEPTH	CLIMATE ZONE ^e
	0.75	0.25	30	13	3/4	13	0	0	
	0.65	0.25	38	13	4/6	13	0	0	
	0.55	0.25	38	20 or 13+5	8/13	19	5/13 ^f	0	
	0.55	0.40	49	20 or 13+5 ^h	8/13	19	10 /13	10, 2 ft	
	0.55	NR	49	20 or 13+5 ^h	13/17	30 ^g	15/19	10, 2 ft	
	0.55	NR	49	20+5 or 13+10 ⁿ	15/20	30 ^g	15/19	10, 4 ft	
	0.55	NR	49	20+5 or 13+10 ⁿ	19/21	38 ^g	15/19	10, 4 ft	

U-factors and SHGC are maximums. When insulation is installed in a cavity which is less than the label or design thickness of the insulation shall not be less than the R-value specified in the table.

The SHGC column applies to all glazed fenestration. Exception: Skylights may be excluded requirements in Climate Zones 1 through 3 where the SHGC for such skylights does not exceed 0.30.

Continuous insulation on the interior or exterior of the home or R-19 cavity insulation at the interior of the basement wall. "13" R-13 cavity insulation on the interior of the basement wall plus R-5 continuous insulation on the interior or exterior of the basement insulation on the interior or exterior of the home or R-13 cavity insulation at the interior of the basement wall.

Required slab edge R-values for heated slabs. Insulation depth shall be the depth of the footing or 2 feet, whichever is greater for heated slabs.