



COLUMBIA COUNTY BUILDING DEPARTMENT  
RESIDENTIAL CHECK LIST

48

MINIMUM PLAN REQUIREMENTS: FLORIDA BUILDING CODE RESIDENTIAL 2023 EFFECTIVE 1 JANUARY 2024 AND  
THE NATIONAL ELECTRICAL 2020 EFFECTIVE 1 JANUARY 2024

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

**ALL BUILDING PLANS MUST INDICATE COMPLIANCE WITH THE CURRENT FLORIDA BUILDING CODES RESIDENTIAL AND THE NATIONAL ELECTRICAL CODE. 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, FBC 1609.1 THRU 1609.6.**

**FOR DESIGN PURPOSES THE FOLLOWING BASIC WIND SPEEDS ARE PER FLORIDA BUILDING CODE FIGURE 1609.3(1) THROUGH 1609.3(4) ULTIMATE DESIGN WIND SPEEDS FOR RISK CATEGORY AND BUILDINGS AND OTHER STRUCTURES Revised 7/1/20**

**Submit Online at- <http://www.columbiacountyfla.com/BuildingandZoning.asp>**

Items to Include-  
Each Box shall be  
Circled as  
Applicable

**GENERAL REQUIREMENTS:**

**APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL**

Select From Drop down

|   |                                                                                                     |                                     |    |    |
|---|-----------------------------------------------------------------------------------------------------|-------------------------------------|----|----|
| 1 | Two (2) complete sets of plans containing the following:                                            | <input checked="" type="checkbox"/> |    |    |
| 2 | All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void | <input checked="" type="checkbox"/> |    |    |
| 3 | Condition space (Sq. Ft.) 1926 Total (Sq. Ft.) under roof 2766                                      | Yes                                 | No | NA |

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 BUILDING 107.1.

**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. | NA  |  | ▼ |
| 7 | Provide a full legal description of property.                                                                                                           | Yes |  | ▼ |

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

| GENERAL REQUIREMENTS:<br>APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL |                                                                                                                                                                                                     | Items to Include-<br>Each Box shall be<br>Circled as<br>Applicable |    |    |
|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|----|----|
| 8                                                                                       | Plans or specifications must show compliance with FBCR Chapter 3                                                                                                                                    | Yes                                                                | No | NA |
|                                                                                         |                                                                                                                                                                                                     | Select From Drop down                                              |    |    |
| 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)                                                                        | NA                                                                 |    | ▼  |
| 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 <sup>2</sup> ), 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                | Yes |  | ▼ |
| 17 | Location, size and height above roof of chimneys                     | NA  |  | ▼ |
| 18 | Location and size of skylights with Florida Product Approval         | NA  |  | ▼ |
| 19 | Number of stories                                                    | Yes |  | ▼ |
| 20 | Building height from the established grade to the roofs highest peak | Yes |  | ▼ |

**Floor Plan Including:**

|    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |     |  |                          |
|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--|--------------------------|
| 21 | Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Yes |  | <input type="checkbox"/> |
| 22 | Raised floor surfaces located more than 30 inches above the floor or grade                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Yes |  | <input type="checkbox"/> |
| 23 | All exterior and interior shear walls indicated                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Yes |  | <input type="checkbox"/> |
| 24 | Shear wall opening shown (Windows, Doors and Garage doors)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Yes |  | <input type="checkbox"/> |
| 25 | Show compliance with Section FBCR 310 Emergency escape and rescue opening shown in each bedroom (net clear opening shown) and Show compliance with Section FBCR 312.2.1 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 |  | <input type="checkbox"/> |
| 26 | Safety glazing of glass where needed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Yes |  | <input type="checkbox"/> |
| 27 | Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 and chapter 24 of FBCR)                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Yes |  | <input type="checkbox"/> |
| 28 | Show stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Yes |  | <input type="checkbox"/> |
| 29 | Identify accessibility of bathroom (see FBCR SECTION 320)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Yes |  | <input type="checkbox"/> |

**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)**

|                                                                                                       |  |                                                                    |
|-------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------|
| <b>GENERAL REQUIREMENTS:</b><br><b>APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</b> |  | Items to Include-<br>Each Box shall be<br>Circled as<br>Applicable |
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**FBCR 403: Foundation Plans**

Select From Drop down

|    |                                                                                                                                                                                                                                                                                                                                                                  |     |  |                          |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--|--------------------------|
| 30 | Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing.                                                                                                                                                                                                                                         | Yes |  | <input type="checkbox"/> |
| 31 | All posts and/or column footing including size and reinforcing                                                                                                                                                                                                                                                                                                   | Yes |  | <input type="checkbox"/> |
| 32 | Any special support required by soil analysis such as piling.                                                                                                                                                                                                                                                                                                    | Yes |  | <input type="checkbox"/> |
| 33 | Assumed load-bearing value of soil 2000 Pound Per Square Foot                                                                                                                                                                                                                                                                                                    | Yes |  | <input type="checkbox"/> |
| 34 | 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 | -   |  |                          |

**FBCR 506: CONCRETE SLAB ON GRADE**

|    |                                                                                                     |     |  |                          |
|----|-----------------------------------------------------------------------------------------------------|-----|--|--------------------------|
| 35 | Show Vapor retarder (6mil. Polyethylene with joints overlaid 6 inches and sealed)                   | Yes |  | <input type="checkbox"/> |
| 36 | Show control joints, synthetic fiber reinforcement or welded fire fabric reinforcement and Supports | Yes |  | <input type="checkbox"/> |

**FBCR 318: PROTECTION AGAINST TERMITES**

|    |                                                                                                                                                                                                            |     |  |                          |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--|--------------------------|
| 37 | 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 |  | <input type="checkbox"/> |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--|--------------------------|

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

|    |                                                                                    |     |  |                          |
|----|------------------------------------------------------------------------------------|-----|--|--------------------------|
| 38 | Show all materials making up walls, wall height, and Block size, mortar type       | Yes |  | <input type="checkbox"/> |
| 39 | Show all Lintel sizes, type, spans and tie-beam sizes and spacing of reinforcement | Yes |  | <input type="checkbox"/> |

**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**

|    |                                                                                                                                                         |     |                          |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--------------------------|
| 40 | Floor truss package shall including layout and details, signed and sealed by Florida Registered Professional Engineer                                   | Yes | <input type="checkbox"/> |
| 41 | Show conventional floor joist type, size, span, spacing and attachment to load bearing walls, stem walls and/or piers                                   | Yes | <input type="checkbox"/> |
| 42 | Girder type, size and spacing to load bearing walls, stem wall and/or piers                                                                             | Yes | <input type="checkbox"/> |
| 43 | Attachment of joist to girder                                                                                                                           | Yes | <input type="checkbox"/> |
| 44 | Wind load requirements where applicable                                                                                                                 | Yes | <input type="checkbox"/> |
| 45 | Show required under-floor crawl space                                                                                                                   | Yes | <input type="checkbox"/> |
| 46 | Show required amount of ventilation opening for under-floor spaces                                                                                      | Yes | <input type="checkbox"/> |
| 47 | Show required covering of ventilation opening                                                                                                           | Yes | <input type="checkbox"/> |
| 48 | Show the required access opening to access to under-floor spaces                                                                                        | Yes | <input type="checkbox"/> |
| 49 | Show the sub-floor structural panel sheathing type, thickness and fastener schedule on the edges & intermediate of the areas structural panel sheathing | Yes | <input type="checkbox"/> |
| 50 | Show Draftstopping, Fire caulking and Fire blocking                                                                                                     | Yes | <input type="checkbox"/> |
| 51 | Show fireproofing requirements for garages attached to living spaces, per FBCR section 302.6                                                            | Yes | <input type="checkbox"/> |
| 52 | Provide live and dead load rating of floor framing systems (psf).                                                                                       | Yes | <input type="checkbox"/> |

**FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION**

| GENERAL REQUIREMENTS:<br>APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL |  | Items to Include-<br>Each Box shall be<br>Circled as<br>Applicable |  |
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Select from Drop down

|    |                                                                                                                                                                                                                      |     |                          |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--------------------------|
| 53 | Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls                                                                                                                               | Yes | <input type="checkbox"/> |
| 54 | Fastener schedule for structural members per table FBC 2304.10.1 are to be shown                                                                                                                                     | Yes | <input type="checkbox"/> |
| 55 | 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 | <input type="checkbox"/> |
| 56 | 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 | <input type="checkbox"/> |
| 57 | Show sizes, type, span lengths and required number of support jack studs, king studs for shear wall opening and girder or header per FBC 2304.3.                                                                     | Yes | <input type="checkbox"/> |
| 58 | Indicate where pressure treated wood will be placed                                                                                                                                                                  | Yes | <input type="checkbox"/> |
| 59 | Show all wall structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing edges & intermediate areas                                                                      | Yes | <input type="checkbox"/> |
| 60 | A detail showing gable truss bracing, wall balloon framing details or/and wall hinge bracing detail                                                                                                                  | Yes | <input type="checkbox"/> |

**FBC :ROOF SYSTEMS:**

|    |                                                                                                |     |                          |
|----|------------------------------------------------------------------------------------------------|-----|--------------------------|
| 61 | Truss design drawing shall meet section FBC 2303.1.1.1 Wood trusses                            | Yes | <input type="checkbox"/> |
| 62 | Include a layout and truss details, signed and sealed by Florida Professional Engineer         | Yes | <input type="checkbox"/> |
| 63 | Show types of connector's assemblies' and resistance uplift rating for all trusses and rafters | Yes | <input type="checkbox"/> |
| 64 | Show gable ends with rake beams showing reinforcement or gable truss and wall bracing details  | Yes | <input type="checkbox"/> |
| 65 | Provide dead load rating of trusses                                                            | Yes | <input type="checkbox"/> |

**FBC 2304.4:Conventional Roof Framing Layout**

|    |                                                                                |     |                          |
|----|--------------------------------------------------------------------------------|-----|--------------------------|
| 66 | Rafter and ridge beams sizes, span, species and spacing                        | Yes | <input type="checkbox"/> |
| 67 | Connectors to wall assemblies' include assemblies' resistance to uplift rating | Yes | <input type="checkbox"/> |
| 68 | Valley framing and support details                                             | Yes | <input type="checkbox"/> |
| 69 | Provide dead load rating of rafter system                                      | Yes | <input type="checkbox"/> |

**FBC 2304.8 ROOF SHEATHING**

|    |                                                                                                                           |     |                          |
|----|---------------------------------------------------------------------------------------------------------------------------|-----|--------------------------|
| 70 | Include all materials which will make up the roof decking, identification of structural panel sheathing, grade, thickness | Yes | <input type="checkbox"/> |
| 71 | Show fastener Size and schedule for structural panel sheathing on the edges & intermediate areas                          | Yes | <input type="checkbox"/> |

## ROOF ASSEMBLIES FRC Chapter 15

|    |                                                                                           |     |  |                          |
|----|-------------------------------------------------------------------------------------------|-----|--|--------------------------|
| 72 | Include all materials which will make up the roof assembles covering                      | Yes |  | <input type="checkbox"/> |
| 73 | Submit Florida Product Approval numbers for each component of the roof assembles covering | Yes |  | <input type="checkbox"/> |

## FBC Energy Chapter 4

Residential construction shall comply with this code by using the following compliance methods in the FBC Chapter 4, 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.*

| GENERAL REQUIREMENTS:<br>APPLICANT - PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL |                                                                      | Items to Include-<br>Each Box shall be<br>Circled as<br>Applicable |                          |
|-----------------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------------------------------------------------------|--------------------------|
| <i>Select from Drop Down</i>                                                            |                                                                      |                                                                    |                          |
| 74                                                                                      | Show the insulation R value for the following areas of the structure | Yes                                                                | <input type="checkbox"/> |
| 75                                                                                      | Attic space                                                          | NA                                                                 | <input type="checkbox"/> |
| 76                                                                                      | Exterior wall cavity                                                 | Yes                                                                | <input type="checkbox"/> |
| 77                                                                                      | Crawl space                                                          | Yes                                                                | <input type="checkbox"/> |

## HVAC information

|    |                                                                                                                  |     |                          |
|----|------------------------------------------------------------------------------------------------------------------|-----|--------------------------|
| 78 | Submit two copies of a Manual J sizing equipment or equivalent computation study                                 | Yes | <input type="checkbox"/> |
| 79 | Exhaust fans shown in bathrooms Mechanical exhaust capacity of 50 cfm intermittent or 20 cfm continuous required | Yes | <input type="checkbox"/> |
| 80 | Show clothes dryer route and total run of exhaust duct                                                           | Yes | <input type="checkbox"/> |

## Plumbing Fixture layout shown

|    |                                                                      |     |                          |
|----|----------------------------------------------------------------------|-----|--------------------------|
| 81 | All fixtures waste water lines shall be shown on the foundation plan | Yes | <input type="checkbox"/> |
| 82 | Show the location of water heater                                    | Yes | <input type="checkbox"/> |

## Private Potable Water

|    |                                         |                         |                          |
|----|-----------------------------------------|-------------------------|--------------------------|
| 83 | Pump motor horse power                  | <del>Yes</del> yes 1 HP | <input type="checkbox"/> |
| 84 | Reservoir pressure tank gallon capacity | - yes 80                | <input type="checkbox"/> |
| 85 | Rating of cycle stop valve if used      | - yes 60 PSI            | <input type="checkbox"/> |

## Electrical layout shown including

|    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |     |                          |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--------------------------|
| 86 | Show Switches, receptacles outlets, lighting fixtures and Ceiling fans                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Yes | <input type="checkbox"/> |
| 87 | 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 | <input type="checkbox"/> |
| 88 | Show the location of smoke detectors & Carbon monoxide detectors                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Yes | <input type="checkbox"/> |
| 89 | Show service panel, sub-panel, location(s) and total ampere ratings                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Yes | <input type="checkbox"/> |
| 90 | 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.<br><br>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 | <input type="checkbox"/> |
| 91 | Appliances and HVAC equipment and disconnects                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Yes | <input type="checkbox"/> |
| 92 | 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 | <input type="checkbox"/> |

**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 performed.

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

**\*\*ITEMS 95, 96, & 98 Are Required After APPROVAL from the ZONING DEPT.\*\***

Select from Drop down

|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |     |    |                          |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|--------------------------|
| 93  | <b>Building Permit Application</b> 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 |    | <input type="checkbox"/> |
| 94  | <b>Parcel Number</b> The parcel number (Tax ID number) from the Property Appraisers Office (386) 758-1083 is required. A copy of property deed is also required. <a href="http://www.columbiacountyfla.com">www.columbiacountyfla.com</a>                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Yes |    | <input type="checkbox"/> |
| 95  | <b>Environmental Health Permit or Sewer Tap Approval</b> A copy of a approved Columbia County Environmental Health (386) 758-1058                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Yes |    | <input type="checkbox"/> |
| 96  | <b>City of Lake City</b> A City Water and/or Sewer letter. Call 386-752-2031                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | NA  |    | <input type="checkbox"/> |
| 97  | <b>Toilet facilities shall be provided for all construction sites</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Yes |    | <input type="checkbox"/> |
| 98  | <b>Town of Fort White</b> (386) 497-2321 If the parcel in the application for building permit is within the Corporate city limits of Fort White, an approval land use development letter issued by the Town of Fort is required to be submitted with the application for a building permit.                                                                                                                                                                                                                                                                                                                                                                                                              | NA  |    | <input type="checkbox"/> |
| 99  | <b>Flood Information:</b> All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting a application to this office. Any project located within a flood zone where the base flood elevation (100 year flood) has been established shall meet the requirements of Section 8.5.2 of the Columbia County Land Development Regulations. Any project located within a flood zone where the base flood elevation has not been established (Zone A) shall meet the requirements of Section 8.5.3 of the Columbia County Land Development Regulations ( <a href="http://Municode.com">Municode.com</a> ) | Yes |    | <input type="checkbox"/> |
| 100 | <b>CERTIFIED FINISHED FLOOR ELEVATIONS</b> 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.                                                                                                                                                                                                                                                                                                                                                                                               | Yes |    | <input type="checkbox"/> |
| 101 | A Flood development permit is also required for AE, Floodway & AH. Development permit cost is \$50.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | NA  |    | <input type="checkbox"/> |
| 102 | <b>Driveway Connection:</b> 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) Separate Check when issued. 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.                                                                                                                             | yes | NA | <input type="checkbox"/> |
| 103 | <b>911 Address:</b> 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.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Yes |    | <input type="checkbox"/> |

**Ordinance Sec. 90-75. - Construction debris.** (e) It shall be unlawful for any person to dispose of or discard solid waste, including construction or demolition debris at any place within the county other than on an authorized disposal site or at the county's solid waste facilities. The temporary storage, not to exceed seven days of solid waste (excluding construction and demolition debris) on the premises where generated or vegetative trash pending disposition as authorized by law or ordinance, shall not be deemed a violation of this section. The temporary storage of construction and demolition debris on the premises where generated or vegetative trash pending disposition as authorized by law or ordinance shall not be deemed in violation of this section; provided, however, such construction and demolition debris must be disposed of in accordance with this article prior to the county's issuance of a certificate of occupancy for the premises. The burning of lumber from a construction or demolition project or vegetative trash when done so with legal and proper permits from the authorized agencies and in accordance with such agencies' rules and regulations, shall not be deemed a violation of this section. No person shall bury, throw, place, or deposit, or cause to be buried, thrown, placed, or deposited, any solid waste, special waste, or debris of any kind into or on any of the public streets, road right-of-way, highways, bridges, alleys, lanes, thoroughfares, waters, canals, or vacant lots or lands within the county. No person shall bury any vegetative trash on any of the public streets, road right-of-way, highways, bridges, lanes, thoroughfares, waters, canals, or lots less than ten acres in size within the county.