

DATE 06/27/2016

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000034189

APPLICANT CIMARON HOLT PHONE 386.623.1603

ADDRESS 352 SW TOMMY LITES STREET LAKE CITY FL 32024

OWNER CIMARON HOLT PHONE 386.623.1603

ADDRESS 242 SW RIVERSIDE AVENUE FT. WHITE FL 32038

CONTRACTOR CIMARON HOLT PHONE 386-623-1603

LOCATION OF PROPERTY 47-S TO US 27,N TO RIVERSIDE, FL AND IT'S 6TH ON R.

TYPE DEVELOPMENT SFD, UTILITY ESTIMATED COST OF CONSTRUCTION 267200.00

HEATED FLOOR AREA 4464.00 TOTAL AREA 5344.00 HEIGHT STORES 2

FOUNDATION CONCRETE WALLS FRAMED ROOF PITCH FLOOR SLAB

LAND USE & ZONING ESA-2 MAX. HEIGHT 35

Minimum Set Back Requirements: STREET-FRONT 30.00 REAR 25.00 SIDE 10.00

NO. EX.D.U. 0 FLOOD ZONE AE DEVELOPMENT PERMIT NO. 16-001

PARCEL ID 23-6S-15-00533-001 SUBDIVISION 3 RIVERS ESTATES

LOT 6 BLOCK PHASE UNIT 1 TOTAL ACRES 1.06

OWNER X

Culvert Permit No. Culvert Waiver 15-689-M Contractor's License Number BS Applicant/Owner/Contractor TC

EXISTING Septic Tank Number LU & Zoning checked by Approved for Issuance N New Resident Time/STEP No.

COMMENTS: MINIMUM FLOOR ELEVATION 34, NEED ELEVATION CERTIFICATE BEFORE

PERMANENT POWER

V-303 & V299

Check # or Cash CASH

FOR BUILDING & ZONING DEPARTMENT ONLY

Temporary Power Foundation Monolithic (Footer Slab)

 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 (Intel) Pool

 date/app. by date/app. by

Permanent power C.O. Final Culvert

 date/app. by date/app. by

Pump pole Utility Pole MH 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 \$ 1340.00 CERTIFICATION FEE \$ 26.72 SURCHARGE FEE \$ 26.72

MISC. FEES \$ 0.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$

FLOOD DEVELOPMENT FEE \$ 50.00 FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ **TOTAL FEE** 1518.44

INSPECTOR'S OFFICE CLERK'S 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.

Columbia County New Building Permit Application

For Office Use Only Application # 1603-48 Date Received 3-15-16 By LH Permit # 34189
 Zoning Official DMS Date 3-22-16 Flood Zone AE Land Use ESA Zoning ESA-2
 FEMA Map # 0458c Elevation 33' MFE 34' River Satufe Plans Examiner J.C. Date 3-21-16
 Comments Hand Elevation Cut at Perm Power

☒ NOC ☒ EH ☒ Deed or PA ☒ Site Plan ☐ State Road Info ☒ Well letter ☒ 911 Sheet ☐ Parent Parcel #
☒ Dev Permit # 16-001 ☐ 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. 15-689m OR City Water Fax

Applicant (Who will sign/pickup the permit) Cimaron Hunt Phone 386 623 1603

Address 352 SW Tommy Lakes ST Lake city FL 32024

Owners Name Cimaron Hunt Phone 386 623 1603

911 Address 242 SW Riverside Ave FT White FL 32038

Contractors Name Cimaron Hunt Phone 386 623 1603

Address 352 SW Tommy Lakes ST Lake city FL 32024

Contractor Email Cimaron Hunt @ gmail . com ***Include to get updates on this job.

Fee Simple Owner Name & Address

Bonding Co. Name & Address

Architect/Engineer Name & Address CES P.O. Box 970 Lake City FL 32056

Mortgage Lenders Name & Address DRUMMOND Community Bank P.O. Box 1039 Chickland FL 32644

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Duke Energy 32644

Property ID Number 00-00-00-00533-001 Estimated Construction Cost 390,000.00

Subdivision Name THREE RIVERS Estates Lot 6 Block Unit 1 Phase

Driving Directions from a Major Road Hwy 27 to Riverside Ave - Left on Riverside Ave - 242 SW Riverside Ave on right

Construction of SID Commercial OR ☒ Residential

Proposed Use/Occupancy Residential Number of Existing Dwellings on Property 0

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 445 Side 11 Side 15 Rear 125

Number of Stories 2 Heated Floor Area 4464 Total Floor Area 5344 Acreage 1.06

Zoning Applications applied for (Site & Development Plan, Special Exception, etc.) V303, V299

33842 - Retaining Wall Permit

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.

Cimmon Holt
Print Owners Name

[Signature]
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.

[Signature]
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 _____

State of Florida Notary Signature (For the Contractor)

SEAL:

**Columbia County Building Department
Flood Development Permit**

**Development Permit
F 023- 16-001**

34189

DATE 06/27/2016 BUILDING PERMIT NUMBER 000034189
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ADDRESS 352 SW TOMMY LITES STREET LAKE CITY FL 32024
OWNER CIMARON HOLT PHONE 386.623.1603
ADDRESS 242 SW RIVERSIDE AVENUE FT. WHITE FL 32038
CONTRACTOR CIMARON HOLT PHONE 386-623-1603
ADDRESS _____ FL _____
SUBDIVISION 3 RIVERS ESTATES Lot 6 Block _____ Unit 1 Phase _____
TYPE OF DEVELOPMENT SFD, UTILITY PARCEL ID NO. 23-6S-15-00533-001

FLOOD ZONE AE BY BS 2-4-2009 FIRM COMMUNITY # 120070 - PANEL # 0458C
FIRM 100 YEAR ELEVATION 33' PLAN INCLUDED YES or NO
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 34'
IN THE REGULATORY FLOODWAY YES or NO RIVER Santa Fe
SURVEYOR / ENGINEER NAME Brett Crows LICENSE NUMBER 65592

☒ ONE FOOT RISE CERTIFICATION INCLUDED

☐ ZERO RISE CERTIFICATION INCLUDED

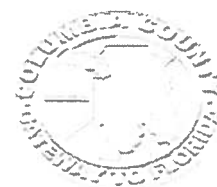
☐ SRWMD PERMIT NUMBER _____
(INCLUDING THE ONE FOOT RISE CERTIFICATION)

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED _____

INSPECTED DATE _____ BY _____

COMMENTS _____

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



SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1603-48 CONTRACTOR C. Holt PHONE _____

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL 380	Print Name <u>DONNIE DAVIS</u> License #: <u>CC0002306</u>	Signature <u>[Signature]</u> Phone #: <u>306 623 0499</u>
MECHANICAL/ A/C	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS	Print Name _____ License #: _____	Signature _____ Phone #: _____
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1603-48

CONTRACTOR

C. Holt

PHONE

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ELECTRICAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C 802	Print Name <u>Clinton G. Wilson</u> License #: <u>CAC057886</u>	Signature <u>Clinton G. Wilson</u> Phone #: <u>386-754-9408</u>
PLUMBING/ GAS	Print Name _____ License #: _____	Signature _____ Phone #: _____
ROOFING 494	Print Name <u>Caleb Laughlin</u> License #: <u>CCC132778</u>	Signature <u>Caleb Laughlin</u> Phone #: <u>386-752-4022</u>
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON	<u>NA</u>		
CONCRETE FINISHER	<u>000644</u>	<u>Rick Holland</u>	<u>Rick Holland</u>
FRAMING <u>855</u>	<u>CC1514780</u>	<u>MATTHEW HENTZELMAN</u>	<u>Matthew Hentzelman</u>
INSULATION <u>20</u>	<u>CBC1259612</u>	<u>Joshua Maddox</u>	<u>Joshua Maddox</u>
STUCCO	<u>NA</u>		
DRYWALL	<u>CBC1259612</u>	<u>Joshua Maddox</u>	<u>Joshua Maddox</u>
PLASTER	<u>NA</u>		
CABINET INSTALLER	<u>CBC1259612</u>	<u>Joshua Maddox</u>	<u>Joshua Maddox</u>
PAINTING	<u>CBC1259612</u>	<u>Joshua Maddox</u>	<u>Joshua Maddox</u>
ACOUSTICAL CEILING	<u>NA</u>		
GLASS	<u>NA</u>		
CERAMIC TILE	<u>CBC1259612</u>	<u>Joshua Maddox</u>	<u>Joshua Maddox</u>
FLOOR COVERING	<u>CBC1259612</u>	<u>Joshua Maddox</u>	<u>Joshua Maddox</u>
ALUM/VINYL SIDING	<u>CBC1259612</u>	<u>Joshua Maddox</u>	<u>Joshua Maddox</u>
GARAGE DOOR	<u>NA</u>		
METAL BLDG ERECTOR	<u>NA</u>		

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

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ELECTRICAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS <u>715</u>	Print Name <u>Poly Bahr</u> License #: <u>CFC-1427145</u>	Signature <u>[Signature]</u> Phone #: <u>856 623-0509</u>
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
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Columbia County Property

Appraiser

updated: 1/23/2015

2014 Tax Year

Parcel: 00-00-00-00533-001

<< Next Lower Parcel | Next Higher Parcel >> |

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

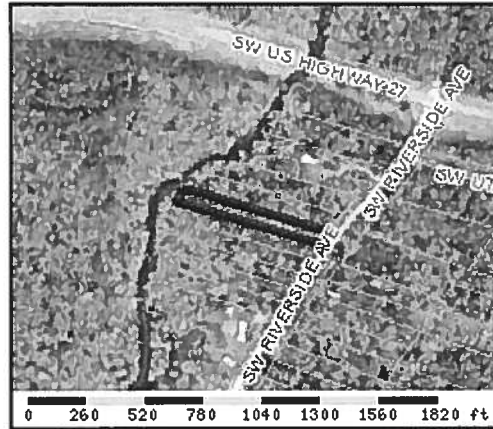
Interactive GIS Map

Print

Owner & Property Info

<< Prev Search Result: 2 of 2

Owner's Name	HOLT CIMARON EUGENE SR		
Mailing Address	352 SW TOMMY LITES ST LAKE CITY, FL 32024		
Site Address	242 SW RIVERSIDE AVE		
Use Desc. (code)	AC/XFOB (009901)		
Tax District	3 (County)	Neighborhood	100000
Land Area	1.060 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 6 UNIT 1 THREE RIVERS EST ORB 486-395, 640-600, 898-1884, 991-302, DIV 1030-69, POA 1078-1269, WD 1079-288, CT 1277-2668, WD 1282-359,			



Property & Assessment Values

2014 Certified Values		
Mkt Land Value	cnt: (0)	\$127,879.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (1)	\$3,010.00
Total Appraised Value		\$130,889.00
Just Value		\$130,889.00
Class Value		\$0.00
Assessed Value		\$130,889.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$130,889 Other: \$130,889 Schl: \$130,889	

2015 Working Values

NOTE:

2015 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
9/4/2014	1282/359	WD	V	U	12	\$116,428.00
6/18/2014	1277/2668	CT	I	U	18	\$100.00
3/28/2006	1079/288	WD	I	Q		\$375,000.00
8/6/2003	991/302	WD	I	Q		\$258,000.00
3/10/2000	898/1884	WD	I	Q		\$170,000.00
1/5/1988	640/600	WD	I	Q		\$35,900.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0084	DOCK-RIVER	1988	\$3,010.00	0000519.000	0 x 0 x 0	(000.00)

0285	SALVAGE	2014	\$5,000.00	0000001.000	0 x 0 x 0	(000.00)
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Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
009901	AC/XFOB (MKT)	76.92 FF - (0000001.060AC)	1.00/1.00/1.00/1.00	\$950.00	\$73,074.00

Columbia County Property Appraiser

updated: 1/23/2015

<< Prev

2 of 2

DISCLAIMER

This information was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Strapping Requirements for Holt

Travis Medeiros <travis@trademarkcg.com>

Mon 12/5/2016 9:52 AM

To: Tommy Matthews <tommy_matthews@columbiacountyfla.com>;

Cc: 'Bo Thomas' <bothomasconstructionllc@gmail.com>; matt@trademarkcg.com <matt@trademarkcg.com>; 'Cimaron Holt' <cimaronholt@gmail.com>;

1. Refer to the span table on page A-8 for end bearing requirements for openings
2. The number of King Studs per side shall equal the number of jacks required by the end bearing
3. Each king stud on either side of the opening shall be strapped per the plan
4. If a jack stud is strapped in lieu of the king stud, then the header must be strapped to the jack and the top plate must be held to the header with a method equal in strength to specified strapping
5. Simpson Strong Drive Screws may be substituted for straps of lesser or equal strength

Travis A. Medeiros

Trademark Construction Group, Inc.

P: 386-755-5254 F: 386-758-4290



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

PERMIT NO: 15-189M
DATE PAID: 12/30/15
FEE PAID: 320.00
RECEIPT #: 3002157
AP# 1218520

APPLICATION FOR:

[] New System [X] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: C. MARION E. HOLT

AGENT:

TELEPHONE: 386 623/603

MAILING ADDRESS: 352 SW Tommy Liles ST LAKE CITY FL 3224

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: 6 BLOCK: SUBDIVISION: LOT 6 Unit 1 THREE RIVERS ESTATES PLATTED: 9/15/78

PROPERTY ID #: 00533-001 ZONING: RES I/M OR EQUIVALENT: [Y] [X] N

PROPERTY SIZE: 1.06 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y] [X] N DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: 242 SW RIVERSIDE AVE FT WHITE FL 320

DIRECTIONS TO PROPERTY: Hwy 27 North to Riverside Ave - TURN LEFT - Sixth Residence on Right - 242 -

BUILDING INFORMATION

[X] RESIDENTIAL [] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	SFO	4	4464	
2				
3				
4				

[] Floor/Equipment Drains [] Other (Specify)

SIGNATURE:

DATE: 1 DEC 2015



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

PERMIT #: **12-SC-1651521**
APPLICATION #: **AP1218520**
DATE PAID: **12/31/15**
FEE PAID: **320.00**
RECEIPT #: **2871072**
DOCUMENT #: **PR1008442**

CONSTRUCTION PERMIT FOR: OSTDS Existing Modification

APPLICANT: Cimaron Holt

PROPERTY ADDRESS: 242 SW Riverside Ave Fort White, FL 32038

LOT: 6 BLOCK: _____ SUBDIVISION: 3 Rivers Estates

PROPERTY ID #: 00-00-00-00533-001 [SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]
[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN MATERIAL FACTS, WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.

SYSTEM DESIGN AND SPECIFICATIONS

T [1,350] GALLONS / GPD Septic CAPACITY
A [] GALLONS / GPD N/A CAPACITY
N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALLONS]
K [450] GALLONS DOSING TANK CAPACITY [87.00] GALLONS @ [6] DOSES PER 24 HRS #Pumps [1]

D [650] SQUARE FEET Drainfield SYSTEM
R [] SQUARE FEET N/A SYSTEM

A TYPE SYSTEM: [x] STANDARD [] FILLED [] MOUND []
I CONFIGURATION: [x] TRENCH [] BED []

N

F LOCATION OF BENCHMARK: Nail with purple ribbon near drainfield area.

I ELEVATION OF PROPOSED SYSTEM SITE [25.00] [INCHES] FT [] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [55.00] [INCHES] FT [] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT

L

D FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [0.00] INCHES

- O 1.) The system is sized for 4 bedrooms with a maximum occupancy of 8 persons (2 per bedroom), for a total estimated flow of 520 gpd.
T 2.) Performing Lift Dosing. Pumps must be certified as suitable for distributing sewage effluent.
H 3.) Proposed transmission line is to be located 25' from a private well. Private well variance approved (12-2016-01).
E 4.) Water quality testing, including bacteriological and nitrate are required prior to final approval. Annual repeats is recommended but not required.
R 5.) Schedule 40 PVC must be used for any part of the transmission line that is within the 75' setback to the private well.

SPECIFICATIONS BY: Jeremy X Gifford

TITLE: Environmental Specialist I

APPROVED BY: _____

TITLE: Environmental Specialist I

Columbia CHD

DATE ISSUED: 09/08/2016

EXPIRATION DATE: 09/08/2017

DH 4016, 08/09 (Obsoletes all previous editions which may not be used)

Incorporated: 64E-6.003, FAC

V I L L

AP1218520

EJ88004

No part of the proposed drainfield shall be located at an elevation below the 10-year flood elevation of 27.2 NAVD. Fill within the 10-yr flood zone is prohibited.

Tank is to be abandoned.

NOTICE OF RIGHTS

A party whose substantial interest is affected by this order may petition for an administrative hearing pursuant to sections 120.569 and 120.57, Florida Statutes. Such proceedings are governed by Rule 28-106, Florida Administrative Code. A petition for administrative hearing must be in writing and must be received by the Agency Clerk for the Department, within twenty-one (21) days from the receipt of this order. The address of the Agency Clerk is 4052 Bald Cypress Way, BIN # A02, Tallahassee, Florida 32399-1703. The Agency Clerk's facsimile number is 850-410-1448.

Mediation is not available as an alternative remedy.

Your failure to submit a petition for hearing within 21 days from receipt of this order will constitute a waiver of your right to an administrative hearing, and this order shall become a 'final order'.

Should this order become a final order, a party who is adversely affected by it is entitled to judicial review pursuant to Section 120.68, Florida Statutes. Review proceedings are governed by the Florida Rules of Appellate Procedure. Such proceedings may be commenced by filing one copy of a Notice of Appeal with the Agency Clerk of the Department of Health and a second copy, accompanied by the filing fees required by law, with the Court of Appeal in the appropriate District Court. The notice must be filed within 30 days of rendition of the final order.



Lumber design values are in accordance with ANSI/TPI 1 section 6.3
These truss designs rely on lumber values established by others.

RE: HOLT - HOLT

MiTek USA, Inc.

6904 Parke East Blvd.
Tampa, FL 33610-4115

Site Information:

Customer Info: HOLT Project Name: HOLT Model: .
Lot/Block: . Subdivision: .
Address: .
City: COLUMBIA COUNTY State: FLORIDA

Name Address and License # of Structural Engineer of Record, If there is one, for the building.

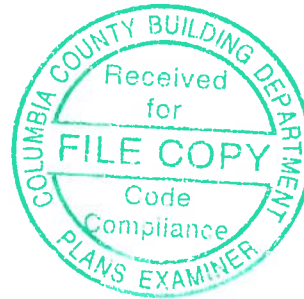
Name: License #:
Address:
City: State:

General Truss Engineering Criteria & Design Loads (Individual Truss Design Drawings Show Special Loading Conditions):

Design Code: FBC2014/TPI2007 Design Program: MiTek 20/20 7.6
Wind Code: N/A Wind Speed: N/A mph
Roof Load: N/A psf Floor Load: 55.0 psf

This package includes 5 individual, dated Truss Design Drawings and 0 Additional Drawings.
With my seal affixed to this sheet, I hereby certify that I am the Truss Design Engineer and this index sheet conforms to 61G15-31.003, section 5 of the Florida Board of Professional Engineers Rules.

No.	Seal#	Truss Name	Date
1	T8190712	A1	3/8/016
2	T8190713	A2GIR	3/8/016
3	T8190714	A3GE	3/8/016
4	T8190715	F01	3/8/016
5	T8190716	F02	3/8/016

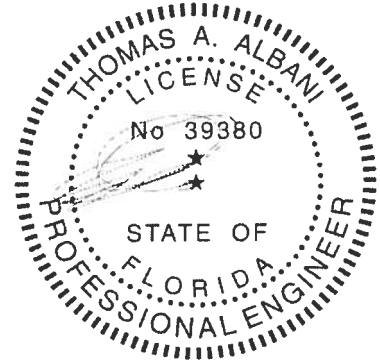


The truss drawing(s) referenced above have been prepared by MiTek Industries, Inc. under my direct supervision based on the parameters provided by Mayo Truss Company, Inc..

Truss Design Engineer's Name: Albani, Thomas

My license renewal date for the state of Florida is February 28, 2017.

IMPORTANT NOTE: Truss Engineer's responsibility is solely for design of individual trusses based upon design parameters shown on referenced truss drawings. Parameters have not been verified as appropriate for any use. Any location identification specified is for file reference only and has not been used in preparing design. Suitability of truss designs for any particular building is the responsibility of the building designer, not the Truss Engineer, per ANSI/TPI-1, Chapter 2.



Thomas A. Albani PE No.39380
MiTek USA, Inc. FL Cert 6634
6904 Parke East Blvd. Tampa FL 33610
Date:

March 8, 2016

6904 Parke East Blvd.
Tampa, FL 36610

Job	Truss	Truss Type	Qty	Ply	HOLT	
HOLT	A1	Attic	30	1		T8190712

Mayo Truss, Mayo, FL

7.640 s Sep 29 2015 MiTek Industries, Inc. Tue Mar 08 16 04 49 2016 Page 2

ID:JGJ_qEhZYjpcLiX_SVOWQzd_oc-wRV0wm9BRYU6hrZ3_xTnHEKzBBBrCC5q99zeeCwzcy_C

NOTES-

- 7) Bottom chord live load (40.0 psf) and additional bottom chord dead load (5.0 psf) applied only to room. 28-31, 26-28, 23-26, 22-23, 20-22, 19-20
- 8) "Semi-rigid pitchbreaks including heels" Member end fixity model was used in the analysis and design of this truss.
- 9) Attic room checked for L/360 deflection.

WARNING - Verify design parameters and READ NOTES ON THIS AND INCLUDED MITEK REFERENCE PAGE MII-7473 rev. 10/03/2015 BEFORE USE.

Design valid for use only with MiTek® connectors. This design is based only upon parameters shown, and is for an individual building component, not a truss system. Before use, the building designer must verify the applicability of design parameters and properly incorporate this design into the overall building design. Bracing indicated is to prevent buckling of individual truss web and/or chord members only. Additional temporary and permanent bracing is always required for stability and to prevent collapse with possible personal injury and property damage. For general guidance regarding the fabrication, storage, delivery, erection and bracing of trusses and truss systems, see **ANSI/TPI1 Quality Criteria, DSB-89 and BCSI Building Component Safety Information** available from Truss Plate Institute, 218 N. Lee Street, Suite 312, Alexandria, VA 22314.



6904 Parke East Blvd.
Tampa, FL 36610

Job	Truss	Truss Type	Qty	Ply	HOLT	T8190713
HOLT	A2GIR	ATTIC	2	2		

Mayo Truss, Mayo, FL

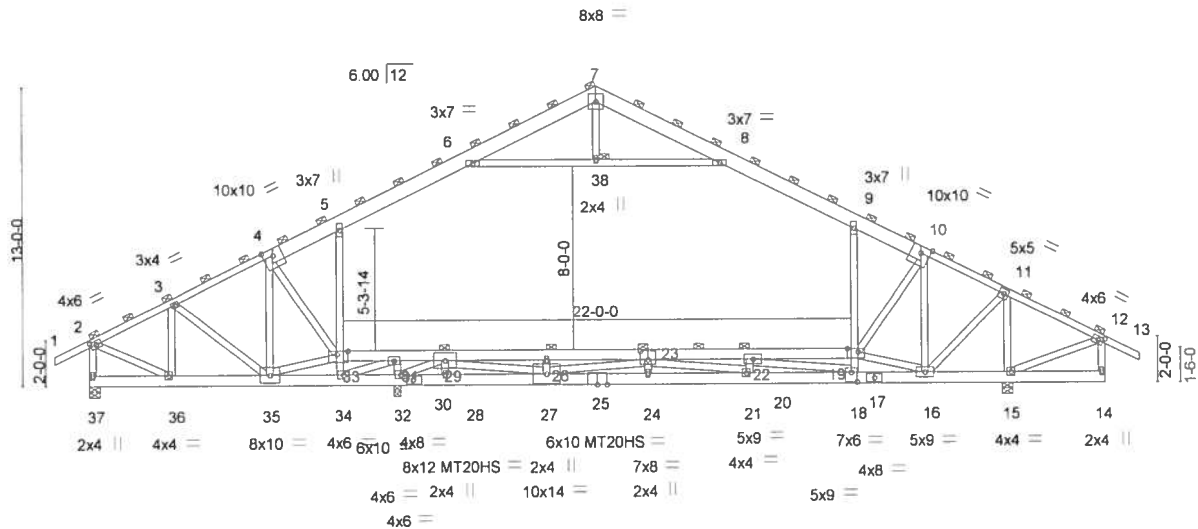
Job Reference (optional)

7 640 s Sep 29 2015 MiTek Industries, Inc. Tue Mar 08 16:04:51 2016 Page 1

ID:JGJ_qEhZYjplLiX_SVOWQzd_oc-spdmLSBSzAkqw8JR5MVFmPQQ?amg?DSdH7Hpczy_A

1-6-0 3-6-14 5-6-14 7-11-8 10-10-4 15-2-14 16-7-13 22-0-0 27-4-5 28-9-2 33-1-12 36-0-8 38-5-2 39-9-4 44-0-0 45-6-0
1-6-0 3-6-14 2-0-0 2-4-10 2-10-12 4-4-10 1-4-13 5-4-5 5-4-5 1-4-13 4-4-10 2-10-12 2-4-10 1-4-2 4-2-12 1-6-0

Scale = 1 100 5



Job	Truss	Truss Type	Qty	Ply	HOLT	T8190713
HOLT	A2GIR	ATTIC	2	2		

Mayo Truss, Mayo, Fl

Job Reference (optional)

7 640 s Sep 29 2015 MiTek Industries, Inc. Tue Mar 08 16 04 51 2016 Page 2

ID:JGJ_qEhZYjpjclIX_SVOWQzd_oc-spdmLSBSzAkqw8jR5MVFmFPQQ?amg?DSdH7IHpzcY_A

NOTES-

- 6) This truss has been designed for a 10.0 psf bottom chord live load nonconcurrent with any other live loads.
- 7) * This truss has been designed for a live load of 0.0psf on the bottom chord in all areas where a rectangle 0-0-0 tall by 0-0-0 wide will fit between the bottom chord and any other members.
- 8) Ceiling dead load (5.0 psf) on member(s). 5-6, 8-9, 6-38, 8-38
- 9) Bottom chord live load (40.0 psf) and additional bottom chord dead load (0.0 psf) applied only to room. 31-33, 29-31, 26-29, 23-26, 22-23, 20-22, 19-20
- 10) Provide mechanical connection (by others) of truss to bearing plate capable of withstanding 100 lb uplift at joint(s) except (jt=lb) 37=106.
- 11) "Semi-rigid pitchbreaks including heels" Member end fixity model was used in the analysis and design of this truss.
- 12) Graphical purlin representation does not depict the size or the orientation of the purlin along the top and/or bottom chord.
- 13) Attic room checked for L/360 deflection.

WARNING - Verify design parameters and READ NOTES ON THIS AND INCLUDED MITEK REFERENCE PAGE MII-7473 rev. 10/03/2015 BEFORE USE.

Design valid for use only with MiTek® connectors. This design is based only upon parameters shown, and is for an individual building component, not a truss system. Before use, the building designer must verify the applicability of design parameters and properly incorporate this design into the overall building design. Bracing indicated is to prevent buckling of individual truss web and/or chord members only. Additional temporary and permanent bracing is always required for stability and to prevent collapse with possible personal injury and property damage. For general guidance regarding the fabrication, storage, delivery, erection and bracing of trusses and truss systems, see **ANSI/TPI1 Quality Criteria, DSB-89 and BCSI Building Component Safety Information** available from Truss Plate Institute, 218 N. Lee Street, Suite 312, Alexandria, VA 22314.



6904 Parke East Blvd.
Tampa, FL 36610

Mayo Truss

Mayo Fl

1-6-0

1-6-0

22-0-0

22-0-0

44-0-0

22-0-0

45-6-0

15-0

Scale = 1/867

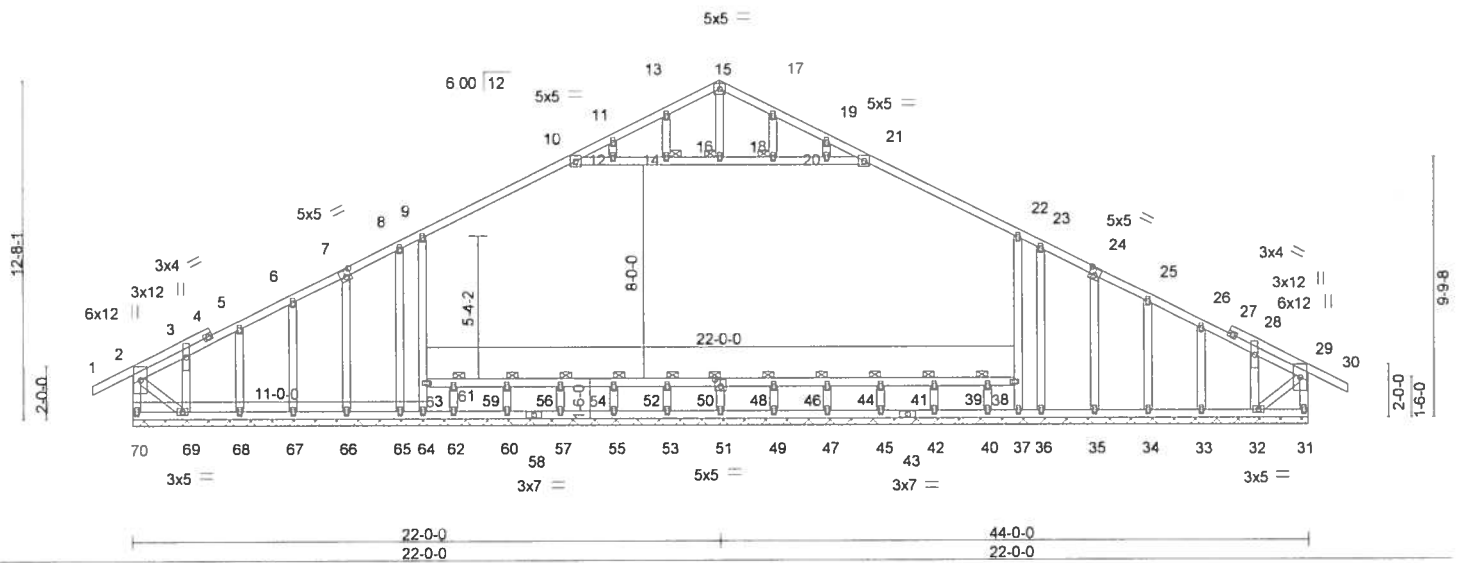


Plate Offsets (X,Y)-- [7 0-2-8 0-3-0], [24 0-2-8 0-3-0], [50 0-2-8 0-3-0]

LOADING (psf)	SPACING-	2-0-0	CSI.	DEFL.	in (loc)	l/defl	L/d	PLATES	GRIP
TCLL 20.0	Plate Grip DOL	1.25	TC 0.72	Vert(LL)	0.00 29-30	n/r	120	MT20	244/190
TCDL 10.0	Lumber DOL	1.25	BC 0.21	Vert(TL)	0.00 29-30	n/r	120		
BCLL 0.0 *	Rep Stress Incr	YES	WB 0.46	Horz(TL)	0.07 31	n/a	n/a		
BCDL 10.0	Code FBC2014/TPI2007		(Matrix)					Weight: 319 lb	FT = 0%

LUMBER-
TOP CHORD 2x4 SP No.2
BOT CHORD 2x4 SP No.2
WEBS 2x4 SP No.2
OTHERS 2x4 SP No.2

BRACING- TOP CHORD	Structural wood sheathing directly applied or 4-11-9 oc purlins, except end verticals.
BOT CHORD	Rigid ceiling directly applied or 10-0-0 oc bracing.
JOINTS	1 Brace at Jt(s): 16, 14, 18, 50, 52, 54, 56, 59, 61, 48, 46, 44, 41, 39

MiTek recommends that Stabilizers and required cross bracing be installed during truss erection, in accordance with Stabilizer Installation guide.

REACTIONS. All bearings 44-0-0.
(lb) - Max Horz 70=-258(LC 10)
Max Uplift All uplift 100 lb or less at joint(s) 70, 31, 66, 67, 68, 35, 34, 33 except
65=-281(LC 22), 69=-735(LC 1), 36=-281(LC 23), 32=-735(LC 1), 64=-129(LC
23), 37=-129(LC 22)
Max Grav All reactions 250 lb or less at joint(s) 65, 66, 67, 68, 69, 36, 35, 34,
33, 32, 51, 53, 55, 57, 60, 62, 49, 47, 45, 42, 40 except 70=1491(LC 1),
33=1491(LC 1), 64=703(LC 22), 37=703(LC 23)

FORCES. (lb) - Max. Comp./Max. Ten. - All forces 250 (lb) or less except when shown.

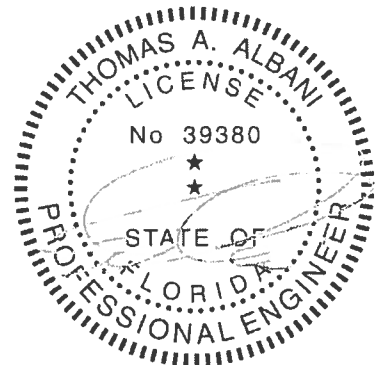
TOP CHORD
2-70=-1465/282, 2-3=-1109/159, 3-4=-1075/160, 4-5=-1058/165, 5-6=-1112/205,
6-7=-1110/237, 7-8=-1107/271, 8-9=-1002/265, 9-10=-1171/359, 10-11=-469/107,
11-13=-437/124, 13-15=-423/153, 15-17=-423/153, 17-19=-437/124, 19-21=-469/107,
21-22=-1171/359, 22-23=-1002/265, 23-24=-1107/271, 24-25=-1110/238,
25-26=-1112/205, 26-27=-1058/166, 27-28=-1075/161, 28-29=-1109/157,
29-31=-1465/280, 10-12=-600/282, 12-14=-600/282, 14-16=-600/282, 16-18=-600/282,
18-20=-600/282, 20-21=-600/282

BOT CHORD
68-69=-89/968, 67-68=-89/968, 66-67=-89/968, 65-66=-88/967, 64-65=-88/967,
62-64=-84/929, 60-62=-84/929, 58-60=-84/929, 57-58=-84/929, 55-57=-84/929,
53-55=-84/929, 51-53=-84/929, 49-51=-84/929, 47-49=-84/929, 45-47=-84/929,
43-45=-84/929, 42-43=-84/929, 40-42=-84/929, 37-40=-84/929, 36-37=-88/967,
35-36=-88/967, 34-35=-89/968, 33-34=-89/968, 32-33=-89/968

WEBS
8-65=-172/314, 23-36=-172/314, 63-64=-694/141, 9-63=-691/146, 37-38=-694/140,
22-38=-691/146, 2-69=-111/1260, 29-32=-110/1260

NOTES-

- 1) Unbalanced roof live loads have been considered for this design.
- 2) Wind: ASCE 7-10; Vult=130mph (3-second gust) Vasd=101mph; TCDD=6.0psf; BCDL=6.0psf; h=15ft; B=45ft; L=44ft; eave=2ft; Cat. II, Exp B, Encl., GCp=0.18; MWFRS (directional) and C-C Interior(1) zone; cantilever left and right exposed ; end vertical left and right exposed,C-C for members and forces & MWFRS for reactions shown, Lumber DOL=1.60 plate grip DOL=1.60
- 3) Truss designed for wind loads in the plane of the truss only. For studs exposed to wind (normal to the face), see Standard Industry Gable End Details as applicable, or consult qualified building designer as per ANSI/TPI 1.
- 4) Provide adequate drainage to prevent water ponding.



Thomas A. Albani PE No.39380
MiTek USA, Inc. FL Cert 6634
6904 Parke East Blvd. Tampa FL 33610
Date:

March 8, 2016

WARNING - Verify design parameters and READ NOTES ON THIS AND INCLUDED MITEK REFERENCE PAGE MII-7473 rev. 10/03/2015 BEFORE USE.

WARNING - Verify design parameters and READ NOTES ON THIS AND INCLUDED INFORMATION BEFORE ERECTION. This design is valid for use only with Miltek® connectors. This design is based only upon parameters shown, and is for an individual building component, not a truss system. Before use, the building designer must verify the applicability of design parameters and properly incorporate this design into the overall building design. Bracing indicated is to prevent buckling of individual truss web and/or chord members only. Additional temporary and permanent bracing is always required for stability and to prevent collapse with possible personal injury and property damage. For general guidance regarding the fabrication, storage, delivery, erection and bracing of Trusses and Truss systems, see **ANSI/TPI1 Quality Criteria, DSB-89 and BCSI Building Component Safety Information** available from Truss Plate Institute, 218 N. Lee Street, Suite 312, Alexandria, VA 22314.



6904 Parke East Blvd.
Tampa, FL 36610

Job	Truss	Truss Type	Qty	Ply	HOLT	T8190714
HOLT	A3GE	GABLE	2	1		

Mayo Truss, Mayo, FL

7 640 s Sep 29 2015 MiTek Industries, Inc. Tue Mar 08 16 04 53 2016 Page 2

ID:JGJ_qEhZYjpLiX_SVOWQzd_oc-oCIXi8DiVn_YASsqDnYjR4ViapOS80vi4bcsLhzcy_8

NOTES-

- 5) All plates are 2x4 MT20 unless otherwise indicated.
- 6) Gable requires continuous bottom chord bearing.
- 7) Truss to be fully sheathed from one face or securely braced against lateral movement (i.e. diagonal web).
- 8) Gable studs spaced at 2-0-0 oc.
- 9) This truss has been designed for a 10.0 psf bottom chord live load nonconcurrent with any other live loads.
- 10) * This truss has been designed for a live load of 20.0psf on the bottom chord in all areas where a rectangle 3-6-0 tall by 2-0-0 wide will fit between the bottom chord and any other members.
- 11) Provide mechanical connection (by others) of truss to bearing plate capable of withstanding 100 lb uplift at joint(s) 70, 31, 66, 67, 68, 35, 34, 33 except (jt=lb) 65=281, 69=735, 36=281, 32=735, 64=129, 37=129.
- 12) "Semi-rigid pitchbreaks including heels" Member end fixity model was used in the analysis and design of this truss.
- 13) Graphical purlin representation does not depict the size or the orientation of the purlin along the top and/or bottom chord.
- 14) Attic room checked for L/360 deflection.

WARNING - Verify design parameters and READ NOTES ON THIS AND INCLUDED MITEK REFERENCE PAGE MII-7473 rev. 10/03/2015 BEFORE USE.

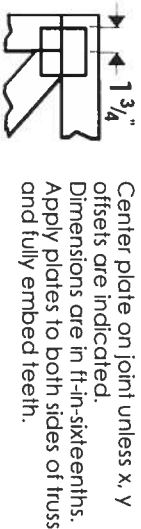
Design valid for use only with MiTek® connectors. This design is based only upon parameters shown, and is for an individual building component, not a truss system. Before use, the building designer must verify the applicability of design parameters and properly incorporate this design into the overall building design. Bracing indicated is to prevent buckling of individual truss web and/or chord members only. Additional temporary and permanent bracing is always required for stability and to prevent collapse with possible personal injury and property damage. For general guidance regarding the fabrication, storage, delivery, erection and bracing of trusses and truss systems, see **ANSI/TPI1 Quality Criteria, D5B-89 and BCSI Building Component Safety Information** available from Truss Plate Institute, 218 N. Lee Street, Suite 312, Alexandria, VA 22314.



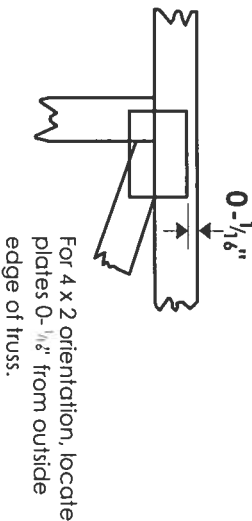
6904 Parke East Blvd.
Tampa, FL 36610

Symbols

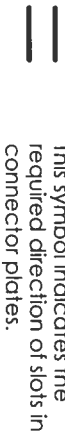
PLATE LOCATION AND ORIENTATION



Center plate on joint unless x, y offsets are indicated. Dimensions are in ft-in-sixteenths. Apply plates to both sides of truss and fully embed teeth.



For 4 x 2 orientation, locate plates 0-1/4\" from outside edge of truss.



This symbol indicates the required direction of slots in connector plates.

***Plate location details available in Mitek 20/20 software or upon request.**

PLATE SIZE

4 X 4

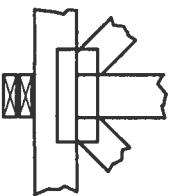
The first dimension is the plate width measured perpendicular to slots. Second dimension is the length parallel to slots.

LATERAL BRACING LOCATION



Indicated by symbol shown and/or by text in the bracing section of the output. Use T or I bracing if indicated.

BEARING

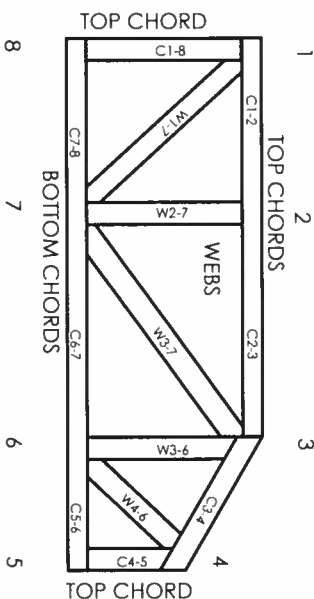


Indicates location where bearings (supports) occur. Icons vary but reaction section indicates joint number where bearings occur. Min size shown is for crushing only.

Industry Standards:

ANSI/TP11: National Design Specification for Metal Plate Connected Wood Truss Construction.
DSB-89: Design Standard for Bracing.
BCSI: Building Component Safety Information, Guide to Good Practice for Handling, Installing & Bracing of Metal Plate Connected Wood Trusses.

Numbering System



JOINTS ARE GENERALLY NUMBERED/LETTERED CLOCKWISE AROUND THE TRUSS STARTING AT THE JOINT FARTHEST TO THE LEFT.

CHORDS AND WEBS ARE IDENTIFIED BY END JOINT NUMBERS/LETTERS.

PRODUCT CODE APPROVALS

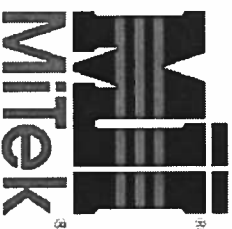
ICC-ES Reports:

ESR-1311, ESR-1352, ESR 1988
ER-3907, ESR-2362, ESR-1397, ESR-3282

Trusses are designed for wind loads in the plane of the truss unless otherwise shown.

Lumber design values are in accordance with ANSI/TP1 section 6.3 These truss designs rely on lumber values established by others.

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Mitek Engineering Reference Sheet: MII-7473 rev. 10/03/2015



General Safety Notes

Failure to Follow Could Cause Property Damage or Personal Injury

1. Additional stability bracing for truss system, e.g. diagonal or X-bracing, is always required. See BCSI.
2. Truss bracing must be designed by an engineer. For wide truss spacing, individual lateral braces themselves may require bracing, or alternative for I bracing should be considered.
3. Never exceed the design loading shown and never stock materials on inadequately braced trusses.
4. Provide copies of this truss design to the building designer, erection supervisor, property owner and all other interested parties.
5. Cut members to bear tightly against each other.
6. Place plates on each face of truss at each joint and embed fully. Knots and wane at joint locations are regulated by ANSI/TP1.
7. Design assumes trusses will be suitably protected from the environment in accord with ANSI/TP11.
8. Unless otherwise noted, moisture content of lumber shall not exceed 19% at time of fabrication.
9. Unless expressly noted, this design is not applicable for use with fire retardant, preservative treated, or green lumber.
10. Camber is a non-structural consideration and is the responsibility of truss fabricator. General practice is to camber for dead load deflection.
11. Plate type, size, orientation and location dimensions indicated are minimum plotting requirements.
12. Lumber used shall be of the species and size, and in all respects, equal to or better than that specified.
13. Top chords must be sheathed or purlins provided at spacing indicated on design.
14. Bottom chords require lateral bracing at 10 ft. spacing, or less, if no ceiling is installed, unless otherwise noted.
15. Connections not shown are the responsibility of others.
16. Do not cut or alter truss member or plate without prior approval of an engineer.
17. Install and load vertically unless indicated otherwise.
18. Use of green or treated lumber may pose unacceptable environmental, health or performance risks. Consult with project engineer before use.
19. Review all portions of this design (front, back, words and pictures) before use. Reviewing pictures alone is not sufficient.
20. Design assumes manufacture in accordance with ANSI/TP11 Quality Criteria.

3489

Prepared by and return to:
Jade D. Bailey
Bunkers Title of the Nature Coast, Inc.
P. O. Box 1260
Old Town, FL 32680

File No. 8114

Permit Number:
Tax Polio Number: R00533-001

Inst. 201612006238 Date: 4/13/2016 Time: 11:03 AM
P. DeWitt Cason, Columbia County Page 1 of 1 8:12:13 P:313

NOTICE OF COMMENCEMENT

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


1. **DESCRIPTION OF PROPERTY:** Legal Description:
Lot 6, THREE RIVERS ESTATES SECTION NO. 1, according to the plat thereof as recorded in Plat Book 3, Page 53, of the Public Records of Columbia County, Florida.
2. **GENERAL DESCRIPTION OF IMPROVEMENTS:** Build Home
3. **OWNER INFORMATION:**
 - a. Name and Address: Cimaron Eugene Holt, Sr., 352 SW Tommy Liles Street, Lake City, FL 32024
 - b. Interest in property: Fee Simple
 - c. Names and address of fee simple title holder (if other than owner):
4. **CONTRACTOR:** Maddox Construction Services, 1215 S SR 349, Branford, FL 32008
5. **SURETY:**
6. **LENDER:** Drummond Community Bank, P.O. Drawer 1039, Chiefland, Florida 32644
7. Persons 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.
Name: _____ Address: _____
8. In addition to himself, Owner designates the following persons to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.
Name: _____ Address: _____
9. Expiration date of Notice of Commencement (the expiration date is 1 year from 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 1, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.


Cimaron Eugene Holt, Sr.

The foregoing instrument was acknowledged before me March 16th 2016 by Cimaron Eugene Holt, Sr. who is personally known to me or who did provide F.D.I. as identification.




Michele L. Taylor
Notary Public
My Commission Expires: 7-29-17

Pursuant to Section 92.525, Florida Statutes,

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.


Cimaron Eugene Holt, Sr.



COLUMBIA COUNTY BUILDING DEPARTMENT RESIDENTIAL CHECK LIST

MINIMUM PLAN REQUIREMENTS: FLORIDA BUILDING CODE RESIDENTIAL 2014 EFFECTIVE 1 JULY 2015
AND THE NATIONAL ELECTRICAL 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 7/1/15

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

Items to Include-
Each Box shall be
Circled as
Applicable

		Yes	No	N/A
1	Two (2) complete sets of plans containing the following:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Condition space (Sq. Ft.)			
	Total (Sq. Ft.) under roof			

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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Dimensions of all building set backs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Location of all other structures (include square footage of structures) on parcel, existing or proposed well and septic tank and all utility easements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Provide a full legal description of property.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 Circled as Applicable		
8	Plans or specifications must show compliance with FBCR Chapter 3			
		YES	NO	N/A
9	Basic wind speed (3-second gust), miles per hour	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	(Wind exposure – if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Wind importance factor and nature of occupancy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	The applicable internal pressure coefficient, Components and Cladding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	The design wind pressure in terms of psf (kN/m ²), to be used for the design of exterior component, cladding materials not specifi ally designed by the registered design professional.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Elevations Drawing including:

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

Floor Plan including:

20	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	/		
21	Raised floor surfaces located more than 30 inches above the floor or grade	/		
22	All exterior and interior shear walls indicated	/		
23	Shear wall opening shown (Windows, Doors and Garage doors)	/		
24	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.	/		
25	Safety glazing of glass where needed	/		
26	Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 and chapter 24 of FBCR)	/		
27	Show stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails	/		
28	Identify accessibility of bathroom (see FBCR SECTION 320)	/		

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 Circled as Applicable
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FBCR 403: Foundation Plans

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

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

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

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

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

Floor Framing System: First and/or second story

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

FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
52	Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls	/		
53	Fastener schedule for structural members per table IRC 602.3 are to be shown	/		
54	Show wood structural panel's sheathing attachment to studs, joist, trusses, rafters and structural members, showing fastener schedule attachment on the edges & intermediate of the areas structural panel sheathing	/		
55	Show all required connectors with a max uplift rating and required number of connectors and oc spacing for continuous connection of structural walls to foundation and roof trusses or rafter systems	/		
56	Show sizes, type, span lengths and required number of support jack studs, king studs for shear wall opening and girder or header per FBCB 2308.9.5	/		
57	Indicate where pressure treated wood will be placed	/		
58	Show all wall structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing edges & intermediate areas	/		
59	A detail showing gable truss bracing, wall balloon framing details or/ and wall hinge bracing detail	/		

FBCR :ROOF SYSTEMS:

60	Truss design drawing shall meet section FBCR 802.1.7.1 Wood trusses	/		
61	Include a layout and truss details, signed and sealed by Florida Professional Engineer	/		
62	Show types of connector's assemblies' and resistance uplift rating for all trusses and rafters	/		
63	Show gable ends with rake beams showing reinforcement or gable truss and wall bracing details	/		
64	Provide dead load rating of trusses	/		

FBCR 802:Conventional Roof Framing Layout

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

FBCR 803 ROOF SHEATHING

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

ROOF ASSEMBLIES FRC Chapter 9

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

FBCR Energy Conservation R.401

Residential construction shall comply with this code by using the following compliance methods in the Residential buildings compliance methods. **Two of the required forms are to be submitted, R 402-2014 As an alternative to the computerized Compliance Method A, the Alternate Residential Point System Method hand calculation, Alternate Form R 402-2014, 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: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
73	Show the insulation R value for the following areas of the structure	<input checked="" type="checkbox"/>		
74	Attic space	<input checked="" type="checkbox"/>		
75	Exterior wall cavity	<input checked="" type="checkbox"/>		
76	Crawl space			<input checked="" type="checkbox"/>

HVAC information

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

Plumbing Fixture layout shown

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

Private Potable Water

82	Pump motor horse power	<input checked="" type="checkbox"/>		
83	Reservoir pressure tank gallon capacity	<input checked="" type="checkbox"/>		
84	Rating of cycle stop valve if used	<input checked="" type="checkbox"/>		

Electrical layout shown including

85	Show Switches, receptacles outlets, lighting fixtures and Ceiling fans	<input checked="" type="checkbox"/>		
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	<input checked="" type="checkbox"/>		
87	Show the location of smoke detectors & Carbon monoxide detectors	<input checked="" type="checkbox"/>		
88	Show service panel, sub-panel, location(s) and total ampere ratings	<input checked="" type="checkbox"/>		
89	On the electrical plans identify the electrical service overcurrent protection device for the main electrical service. This device shall be installed on the exterior of structures to serve as a disconnecting means for the utility company electrical service. Conductors used from the exterior disconnecting means to a panel or sub panel shall have four-wire conductors, of which one conductor shall be used as an equipment ground. Indicate if the utility company service entrance cable will be of the overhead or underground type. 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	<input checked="" type="checkbox"/>		
90	Appliances and HVAC equipment and disconnects	<input checked="" type="checkbox"/>		
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. NEC 210.12A	<input checked="" type="checkbox"/>		

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL	Items to Include- Each Box shall be Circled as Applicable
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THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS

		YES	NO	N/A
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.	✓		
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 required. www.columbiacountyfla.com	✓		
94	Environmental Health Permit or Sewer Tap Approval A copy of a approved Columbia County Environmental Health (386) 758-1058	✓		
95	City of Lake City A City Water and/or Sewer letter. Call 386-752-2031			✓
96	Toilet facilities shall be provided for all construction sites	✓		
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.			✓
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	✓		
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.	✓		
100	A Flood development permit is also required for AE, Floodway & AH. Development permit cost is \$50.00	✓		
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) 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.			✓
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.			✓

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.

Section 105 of the Florida Building Code defines the:

Time limitation of application.

An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

Single-family residential dwelling.

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

Permit intent.

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

If work has commenced.

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

New Permit.

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

Work Shall Be:

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

The Fee:

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

Notification:

When the application is approved for permitting the applicant will be notified by phone as to the status by the Columbia County Building & Zoning Department.

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. Statewide approved products are listed online @ www.floridabuilding.org

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
1. EXTERIOR DOORS			
A. SWINGING	Therma-Tru	Exterior Door	5891.1
B. SLIDING	Viwin Tech	French Sliding Door	
C. SECTIONAL/ROLL UP			
D. OTHER			
2. WINDOWS			
A. SINGLE/DOUBLE HUNG	Viwin Tech	Double Hung Window	
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. FIXED	Viwin Tech	Transom Window	
E. MULLION			
F. SKYLIGHTS			
G. OTHER			
3. PANEL WALL			
A. SIDING	James Hardie	Cement board Siding	13192.1-20
B. SOFFITS	KAYCAN	Aluminum Soffit	12198-23
C. STOREFRONTS			
D. GLASS BLOCK			
E. OTHER			
4. ROOFING PRODUCTS			
A. ASPHALT SHINGLES			
B. NON-STRUCT METAL	Gulf Coast Supply	26g Standing Seam GULF LDC	11651.15 R2
C. ROOFING TILES			
D. SINGLE PLY ROOF			
E. OTHER			
5. STRUCT COMPONENTS			
A. WOOD CONNECTORS	Simpson	Strong tie	11473
B. WOOD ANCHORS			
C. TRUSS PLATES			
D. INSULATION FORMS			
E. LINTELS			
F. OTHERS			
6. NEW EXTERIOR			
ENVELOPE PRODUCTS			

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.

Further, I understand these products may have to be removed if approval cannot be demonstrated during inspection.

Contractor OR Agent Signature

Date

NOTES:

PROJECT

Title:	Holt River home	Bedrooms:	4	Address Type:	Street Address
Building Type:	User	Conditioned Area:	4464	Lot #	
Owner:	Holt River Home	Total Stories:	1	Block/SubDivision:	
# of Units:	1	Worst Case:	No	PlatBook:	
Builder Name:		Rotate Angle:	0	Street:	
Permit Office:	Columbia	Cross Ventilation:	Yes	County:	Columbia
Jurisdiction:		Whole House Fan:	No	City, State, Zip:	, FL ,
Family Type:	Single-family				
New/Existing:	New (From Plans)				
Comment:					

CLIMATE

✓	Design Location	TMY Site	IECC Zone	Design Temp 97.5 %	Design Temp 2.5 %	Int Design Temp Winter	Int Design Temp Summer	Heating Degree Days	Design Moisture	Daily Temp Range
_____	FL, Jacksonville	FL_JACKSONVILLE_INT	2	32	93	70	75	1281	49	Medium

BLOCKS

Number	Name	Area	Volume
1	Block1	4464	44640

SPACES

Number	Name	Area	Volume	Kitchen	Occupants	Bedrooms	Infil ID	Finished	Cooled	Heated
1	Main	4464	44640	Yes	2	4	1	Yes	Yes	Yes

FLOORS

✓	#	Floor Type	Space	Perimeter	R-Value	Area		Tile	Wood	Carpet
_____	1	Slab-On-Grade Edge Insulatio	Main	226 ft	0	4464 ft²	---	0	0	1

ROOF

✓	#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	SA Tested	Emitt	Emitt Tested	Deck Insul.	Pitch (deg)
_____	1	Gable or Shed	Composition shingles	3035 ft²	480 ft²	Medium	0.9	N	0.9	No	0	18.4

ATTIC

✓	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
_____	1	Full attic	Vented	300	2880 ft²	Y	N

CEILING

✓	#	Ceiling Type	Space	R-Value	Area	Framing Frac	Truss Type
_____	1	Under Attic (Vented)	Main	30	2880 ft²	0.1	Wood

WALLS

✓	#	Ornt	Adjacent To	Wall Type	Space	Cavity R-Value	Width Ft	In	Height Ft	In	Area	Sheathing R-Value	Framing Fraction	Solar Absor.	Below Grade%
___	1	N	Exterior	Frame - Wood	Main	11	57	1	10	0	571.0 ft²	0.6	0.25	0.8	0
___	2	E	Exterior	Frame - Wood	Main	11	156	3	9	0	1406.0 ft²	0.6	0.25	0.8	0
___	3	S	Exterior	Frame - Wood	Main	11	63	5	9	0	571.0 ft²	0.6	0.25	0.8	0
___	4	W	Exterior	Frame - Wood	Main	11	156	3	9	0	1406.3 ft²	0.6	0.25	0.8	0

DOORS

✓	#	Ornt	Door Type	Space	Storms	U-Value	Width Ft	In	Height Ft	In	Area
___	1	N	Wood	Main	None	.46	3		7		21 ft²
___	2	S	Wood	Main	None	.46	3		7		21 ft²

WINDOWS

Orientation shown is the entered, Proposed orientation.

✓	#	Ornt	Wall ID	Frame	Panes	NFRC	U-Factor	SHGC	Area	Overhang Depth	Separation	Int Shade	Screening
___	1	n	1	Metal	Low-E Double	Yes	0.4	0.23	30.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	2	n	1	Metal	Low-E Double	Yes	0.4	0.23	45.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	3	n	1	Metal	Low-E Double	Yes	0.4	0.23	45.4 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	4	n	1	Metal	Low-E Double	Yes	0.4	0.23	60.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	5	e	2	Metal	Low-E Double	Yes	0.4	0.23	42.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	6	e	2	Metal	Low-E Double	Yes	0.4	0.23	5.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	7	e	2	Metal	Low-E Double	Yes	0.4	0.23	16.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	8	e	2	Metal	Low-E Double	Yes	0.4	0.23	18.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	9	e	2	Metal	Low-E Double	Yes	0.4	0.23	18.5 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	10	e	2	Metal	Low-E Double	Yes	0.4	0.23	19.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	11	e	2	Metal	Low-E Double	Yes	0.4	0.23	45.4 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	12	s	3	Metal	Low-E Double	Yes	0.4	0.23	29.2 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	13	s	3	Metal	Low-E Double	Yes	0.4	0.23	18.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	14	s	3	Metal	Low-E Double	Yes	0.4	0.23	19.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	15	s	3	Metal	Low-E Double	Yes	0.4	0.23	19.5 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	16	s	3	Metal	Low-E Double	Yes	0.4	0.23	20.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	17	w	4	Metal	Low-E Double	Yes	0.4	0.23	10.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	18	w	4	Metal	Low-E Double	Yes	0.4	0.23	16.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	19	w	4	Metal	Low-E Double	Yes	0.4	0.23	18.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	20	w	4	Metal	Low-E Double	Yes	0.4	0.23	37.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5
___	21	W	4	Metal	Low-E Double	Yes	0.4	0.23	45.0 ft²	1 ft 0 in	1 ft 0 in	Drapes/blinds	Exterior 5

INFILTRATION

#	Scope	Method	SLA	CFM 50	ELA	EqLA	ACH	ACH 50
1	Wholehouse	Proposed ACH(50)	.000318	3720	204.22	384.07	.2446	5

HEATING SYSTEM

<input checked="" type="checkbox"/>	#	System Type	Subtype	Efficiency	Capacity	Block	Ducts
<input type="checkbox"/>	1 A	Electric Heat Pump	Split	HSPF:9	56.5 kBtu/hr	1	sys#1
<input type="checkbox"/>	1 B	Electric Heat Pump	Split	HSPF:8.2	28.8 kBtu/hr	1	sys#1

COOLING SYSTEM

<input checked="" type="checkbox"/>	#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Block	Ducts
<input type="checkbox"/>	1 A	Central Unit	Split	SEER: 14	56.5 kBtu/hr	1695 cfm	0.7	1	sys#1
<input type="checkbox"/>	1 B	Central Unit	Split	SEER: 14	28.8 kBtu/hr	864 cfm	0.7	1	sys#1

HOT WATER SYSTEM

<input checked="" type="checkbox"/>	#	System Type	SubType	Location	EF	Cap	Use	SetPnt	Conservation
<input type="checkbox"/>	1	Electric	None	Main	0.95	40 gal	70 gal	120 deg	None

SOLAR HOT WATER SYSTEM

<input checked="" type="checkbox"/>	FSEC Cert #	Company Name	System Model #	Collector Model #	Collector Area	Storage Volume	FEF
<input type="checkbox"/>	None	None			ft ²		

TEMPERATURES

Programable Thermostat: Y		Ceiling Fans:											
Cooling	<input type="checkbox"/> Jan	<input type="checkbox"/> Feb	<input type="checkbox"/> Mar	<input type="checkbox"/> Apr	<input type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input type="checkbox"/> Oct	<input type="checkbox"/> Nov	<input type="checkbox"/> Dec	
Heating	<input checked="" type="checkbox"/> Jan	<input checked="" type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input checked="" type="checkbox"/> Apr	<input type="checkbox"/> May	<input type="checkbox"/> Jun	<input type="checkbox"/> Jul	<input type="checkbox"/> Aug	<input type="checkbox"/> Sep	<input checked="" type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input checked="" type="checkbox"/> Dec	
Venting	<input type="checkbox"/> Jan	<input type="checkbox"/> Feb	<input type="checkbox"/> Mar	<input type="checkbox"/> Apr	<input type="checkbox"/> May	<input type="checkbox"/> Jun	<input type="checkbox"/> Jul	<input type="checkbox"/> Aug	<input type="checkbox"/> Sep	<input type="checkbox"/> Oct	<input type="checkbox"/> Nov	<input type="checkbox"/> Dec	
Thermostat Schedule: HERS 2006 Reference		Hours											
Schedule Type		1	2	3	4	5	6	7	8	9	10	11	12
Cooling (WD)	AM PM	78 80	78 80	78 78	78 78	78 78	78 78	78 78	78 78	80 78	80 78	80 78	80 78
Cooling (WEH)	AM PM	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78
Heating (WD)	AM PM	66 68	66 68	66 68	66 68	66 68	68 68	68 68	68 68	68 68	68 68	68 66	68 66
Heating (WEH)	AM PM	66 68	66 68	66 68	66 68	66 68	68 68	68 68	68 68	68 68	68 68	68 66	68 66

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE INDEX* = 92

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

, , FL,

1. New construction or existing	New (From Plans)	9. Wall Types	Insulation	Area
2. Single family or multiple family	Single-family	a. Frame - Wood, Exterior	R=11.0	3954.30 ft ²
3. Number of units, if multiple family	1	b. N/A	R=	ft ²
4. Number of Bedrooms	4	c. N/A	R=	ft ²
5. Is this a worst case?	No	d. N/A	R=	ft ²
6. Conditioned floor area (ft ²)	4464	10. Ceiling Types	Insulation	Area
7. Windows**	Description	a. Under Attic (Vented)	R=30.0	2880.00 ft ²
a. U-Factor:	DbI, U=0.40	b. N/A	R=	ft ²
SHGC:	SHGC=0.23	c. N/A	R=	ft ²
b. U-Factor:	N/A	11. Ducts		R ft ²
SHGC:				
c. U-Factor:	N/A	12. Cooling systems	kBtu/hr	Efficiency
SHGC:		a. Central Unit	85.3	SEER:14.00
d. U-Factor:	N/A	13. Heating systems	kBtu/hr	Efficiency
SHGC:		a. Electric Heat Pump	85.3	HSPF:8.73
Area Weighted Average Overhang Depth:	1.000 ft.	14. Hot water systems		Cap: 40 gallons
Area Weighted Average SHGC:	0.230	a. Electric		EF: 0.95
8. Floor Types	Insulation	b. Conservation features		
a. Slab-On-Grade Edge Insulation	R=0.0	None		
b. N/A	R=	15. Credits		CF, CV, Pstat
c. N/A	R=			

I certify that this home has complied with the Florida Energy Efficiency Code for Building Construction through the above energy saving features which will be installed (or exceeded) in this home before final inspection. Otherwise, a new EPL Display Card will be completed based on installed Code compliant features.

Builder Signature: _____ Date: _____

Address of New Home: _____ City/FL Zip: _____



*Note: This is not a Building Energy Rating. If your Index is below 70, your home may qualify for energy efficient mortgage (EEM) incentives if you obtain a Florida EnergyGauge Rating. Contact the EnergyGauge Hotline at (321) 638-1492 or see the EnergyGauge web site at energygauge.com for information and a list of certified Raters. For information about the Florida Building Code, Energy Conservation, contact the Florida Building Commission's support staff.

**Label required by Section R303.1.3 of the Florida Building Code, Energy Conservation, if not DEFAULT.



Load Short Form Unit 1

Job: Holt River Home
Date: Mar 10, 2016
By: DJM

Project Information

For: Holt River Home

Design Information

	Htg	Clg	Infiltration	
Outside db (°F)	34	93	Method	Simplified
Inside db (°F)	70	75	Construction quality	Average
Design TD (°F)	36	18	Fireplaces	1 (Average)
Daily range	-	M		
Inside humidity (%)	50	50		
Moisture difference (gr/lb)	32	50		

HEATING EQUIPMENT

Make	Rheem
Trade	RHEEM
Model	RP1460AJ1
AHRI ref	7489184
Efficiency	9 HSPF
Heating input	
Heating output	57000 Btuh @ 47°F
Temperature rise	28 °F
Actual air flow	1883 cfm
Air flow factor	0.039 cfm/Btuh
Static pressure	0.53 in H2O
Space thermostat	

COOLING EQUIPMENT

Make	Rheem
Trade	RHEEM
Cond	RP1460AJ1
Coil	RH1T6024STAN
AHRI ref	7489184
Efficiency	11.5 EER, 14 SEER
Sensible cooling	45200 Btuh
Latent cooling	11300 Btuh
Total cooling	56500 Btuh
Actual air flow	1883 cfm
Air flow factor	0.040 cfm/Btuh
Static pressure	0.53 in H2O
Load sensible heat ratio	0.87

ROOM NAME	Area (ft²)	Htg load (Btuh)	Clg load (Btuh)	Htg AVF (cfm)	Clg AVF (cfm)
Kitchen/Living	1106	15026	20081	584	803
Utility	72	1786	2450	69	98
Bed 2	287	5723	4173	222	167
B2 Bath	56	915	458	36	18
B2 WIC	28	11	18	0	1
Pantry	48	11	19	0	1
Room7	28	0	35	0	1
mech room	24	0	0	0	0
M Bed	349	6408	4446	249	178
M Bath	108	1763	1473	69	59
M Toilet	18	0	35	0	1
Stairs	138	0	0	0	0
Solarium	624	16822	13919	654	556

Calculations approved by ACCA to meet all requirements of Manual J 8th Ed.



Right-Suite® Universal 2015 15.0.25 RSU11033

Documents\Wilson Heat & Air\Holt River home.rup Calc = MJ8 Front Door faces: E

2016-Mar-10 12:23:07

Page 1

Unit 1	2886	48465	47108	1883	1883
Other equip loads		0	0		
Equip. @ 0.98 RSM			46165		
Latent cooling			7279		
TOTALS	2886	48465	53444	1883	1883

Calculations approved by ACCA to meet all requirements of Manual J 8th Ed.

Project Information

For: Holt River Home

Design Information

	Htg	Clg	Infiltration	Simplified
Outside db (°F)	34	93	Method	Average
Inside db (°F)	70	75	Construction quality	1 (Average)
Design TD (°F)	36	18	Fireplaces	
Daily range	-	M		
Inside humidity (%)	50	50		
Moisture difference (gr/lb)	32	50		

HEATING EQUIPMENT

Make Rheem
Trade RHEEM
Model RP1430AJ1
AHRI ref 7489175

Efficiency 8.2 HSPF
Heating input
Heating output 27400 Btuh @ 47°F
Temperature rise 26 °F
Actual air flow 960 cfm
Air flow factor 0.050 cfm/Btuh
Static pressure 0.53 in H2O
Space thermostat

COOLING EQUIPMENT

Make Rheem
Trade RHEEM
Cond RP1430AJ1
Coil RH1T3617STAN
AHRI ref 7489175

Efficiency 11.5 EER, 14 SEER
Sensible cooling 20160 Btuh
Latent cooling 8640 Btuh
Total cooling 28800 Btuh
Actual air flow 960 cfm
Air flow factor 0.045 cfm/Btuh
Static pressure 0.53 in H2O
Load sensible heat ratio 0.83

ROOM NAME	Area (ft²)	Htg load (Btuh)	Clg load (Btuh)	Htg AVF (cfm)	Clg AVF (cfm)
Bed 5	483	7009	6781	348	305
Bath 3	48	686	487	34	22
Storage	90	1287	914	64	41
Loft	489	3363	6272	167	283
Bed 4	399	6235	6311	309	284
Bath 4	54	772	548	38	25
Unit 2	1563	19353	21314	960	960
Other equip loads		0	0		
Equip. @ 0.98 RSM			20888		
Latent cooling			4295		
TOTALS	1563	19353	25183	960	960

Calculations approved by ACCA to meet all requirements of Manual J 8th Ed.

ONE FOOT RISE ANALYSIS AND CERTIFICATION 100 YEAR BASE FLOOD

PROJECT DATA

PARCEL ID: 00-00-00-00533-001

PROPERTY DESCRIPTION: Lot 6, Unit 1, Three Rivers Estates

OWNER: Cimaron Holt

PROJECT DESCRIPTION: 2,800 sq ft site built home and retaining wall built 560' west of SW Riverside Ave

FLOOD ZONE: AE

BASE FLOOD ELEVATION: 33.0 Based on SRWMD Effective Flood Report

EXISTING GRADE ELEVATION (AT BUILDING LOCATION): +/-23' from USGS Quad Map

CONCLUSION

To demonstrate the proposed construction will not cause more than a 1 foot rise in the flood elevation, the following calculation was performed:

Area of Flood Zone = Undetermined, Associated with the Santa Fe River

Depth of Lot below Flood Elevation = 33.0 ft – 23ft = 10 ft

Storage volume removed due to development:

Fill under building (to EL = 23.0): 1 ft * 2,880 sf = 2,880 cf

Fill behind Retaining wall (to EL = 23.0) = 110' * ½ (3')(7') = 1,155 cf

Columns: 28 (total) * $\pi(1.33^2)/4$ * 10 ft = 389 cf

Total Fill below BFE = 2,880 + 1,155 + 389 = 4,425 cf = 0.10 acre-ft

Flood Level Increase (if flood zone area = lot size = 1.05 acres) = 0.10 acre-ft / 1.05 acres = **0.095 ft**

This is a very conservative calculation for the following reasons:

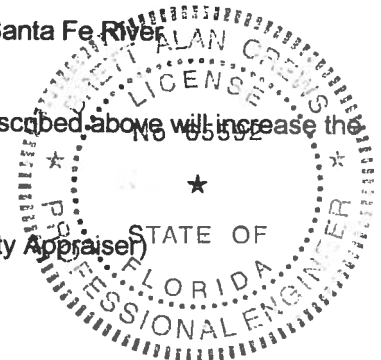
- Flood Zone Area is much larger than 1.05 acres and associated with the Santa Fe River

CERTIFICATION

I hereby certify that, to the best of my knowledge, construction of the project as described above will increase the flood elevations less than one foot at the project location.

ATTACHEMENTS

SRWMD Effective Flood Report, Ownership Information (Columbia County Property Appraiser)



Brett A. Crews 11-28-2015
Brett A. Crews, PE No. 65592



Columbia County Property Appraiser

J. Doyle Crews - Lake City, Florida 32055 | 388-758-1083

PARCEL: 00-00-00-00533-001 - AC/XFOB (009901)

LOT 6 UNIT 1 THREE RIVERS EST ORB 486-395, 640-600, 898-1884, 991-302, DIV 1030-69, POA 1078-1269,
WD 1079-288, CT 1277-2668, WD 1282-359,

NOTES:

Name: HOLT CIMARON EUGENE SR		2014 Certified Values	
Site:	242 SW RIVERSIDE AVE	Land	\$127,879.00
Mail:	352 SW TOMMY LITES ST LAKE CITY, FL 32024	Bldg	\$0.00
		Assd	\$130,889.00
Sales	9/4/2014 \$116,428.00 V / U	Exmpt	\$0.00
Info	6/18/2014 \$100.00 I / U	Cnty: \$130,889	
		Taxbl	Other: \$130,889 Schl: \$130,889





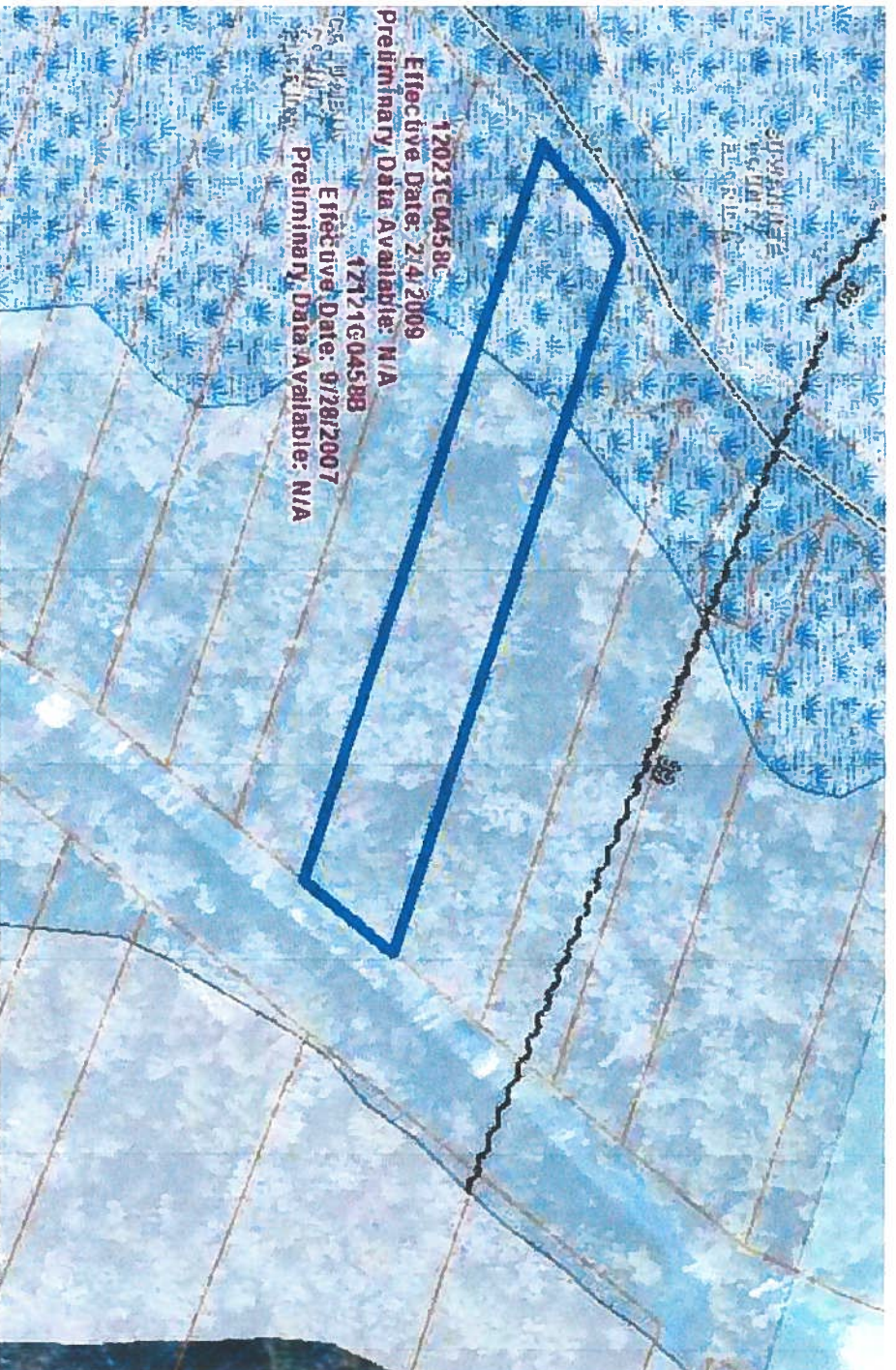
Suwannee River Water Management District Effective Flood Information Report

LOCATION

Date: 11-24-2015
Parcel: 00-00-00-00533-000
County: Columbia
STR: S023 T06 R15
Columbia Flood Hazard Areas Status: Effective:
02/04/2009

FLOOD INFORMATION

FIRM Panel(s): 12023C0458C, 12121C0458B

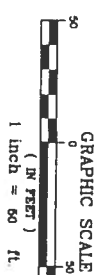


Effective Flood Zones described on
Page 2

SFHA - AE w/Floodway	SFHA - Zone VE	Wetlands	Counties	Depressions
SFHA - Zone A	SFHA - Zone A	FIRM Panel	SRWMD	BFE
SFHA - Zones AE, AH, AO	0.2 % (shaded X)	State Lands	Parcels	Cross Sections

The Federal Emergency Management Agency (FEMA) maintains information about map features, such as street locations and names, in or near designated flood hazard areas. The information herein represents the best available data as of the effective date shown. The applicable Flood Insurance Study and a Digital Flood Insurance Rate Map is available online (<http://www.srwmdfloodreport.com>). To obtain more detailed information in areas where Base Flood Elevations (BFEs) and/or floodways have been determined, users are encouraged to also consult the FEMA Map Service Center at 1-800-358-9616 (<http://www.msc.fema.gov>) for information on available products associated with this FIRM panel. Available products from the Map Service Center may include previously issued Letters of Map Change. Requests to revise flood information in or near designated flood hazard areas may be provided to FEMA during the community review period on preliminary maps, or through the Letter of Map Change process for effective maps.

LYING IN SECTION 23, TOWNSHIP 6 SOUTH, RANGE 15 EAST,
COLUMBIA COUNTY, FLORIDA



FLOOD NOTE:
THE SUBJECT PROPERTY LIES WITHIN FLOOD
ZONE AE (SPECIAL FLOOD HAZARD AREAS
SUBJECT TO INUNDATION BY THE 1% ANNUAL
CHANCE FLOOD, HAVING A BASE FLOOD
ELEVATION OF 33 FEET, NORTH AMERICAN
VERTICAL DATUM OF 1988). AS SHOWN ON
FLOOD INSURANCE RATE MAP NUMBER
1222SC04580D FOR COLUMBIA COUNTY, FLORIDA.
EFFECTIVE DATE FEBRUARY 4, 2009. FOR
COLUMBIA COUNTY NUMBER 120070 PANEL
NUMBER 0458 SJFRX C

LEGEND

- (C) = FOUND 6"x4" CONCRETE MONUMENT (NO IDENTIFICATION)
- (C) = CALCULATED FROM PLAT
- (M) = MEASURED
- (P) = PLAT DATA
- ☐ = TELEPHONE PEDESTAL
- ☐ = WOOD POWER POLE
- = CUR ANCHOR
- = SPOT ELEVATION

LEON ARN FLOWERS

PROFESSIONAL SURVEYOR & MAPPER
P.O. BOX 1000, ST. LOUIS, MO 63101

CERTIFIED TO

FIELD BOOK: SEE FOLDER	JOB NUMBER: 18-032
DRAFTED: LAF	
CHECKED: LAF	SHEET 1 OF 1
SURVEY DATE: 2/13/18	

EXISTING WETLAND BOUNDARY
AT TOE OF SLOPE
PER SE ENVIRONMENTAL GEOLOGY

PROJECT BOUNDARY

TO SW RIVERSIDE AVE

11'

11'

PROPOSED
DECK / WALKWAY

PROPOSED
SINGLE FAMILY RESIDENCE
2,150 SF

12.5'

15.6'

20'

21.5' SLID



REVISIONS			
DATE	BY	DESCRIPTION	DATE
<div> <div> <p>CES</p> <p>CERTIFICATE OF AUTHORIZATION NO. 28042 P.O. BOX 970 LAKE CHARLES, LA 70605 PHONE: 336.754.4085</p> </div> <div> <p>Brett A. Crowe, P.E. 65592</p> </div> </div>			
<div> <div> <p>DESIGNED BY</p> <p>BC</p> </div> <div> <p>APPROVED BY</p> <p>BC</p> </div> </div>		<div> <p>HOLT RESIDENCE</p> <p>SITE PLAN</p> </div>	<div> <p>CES PROJECT NO</p> <p>2015-013</p> </div> <div> <p>SHEET</p> <p>SIT2</p> </div>

Notice of Treatment

Applicator: **Florida Pest Control** • (www.flapest.com)

Address: 5365 E. Ponce de Leon

City: Highway City, FL Phone: 386-752-1703

Site Location: Subdivision

Lot # _____ Block# _____ Permit # 34189
33842

Address: 292 SW Riverside Ave, Ft. White

Product used	Active Ingredient	% Concentration
<input type="checkbox"/> Premise	Imidacloprid	0.1%
<input type="checkbox"/> Termidor	Fipronil	0.12%
<input type="checkbox"/>		

Type treatment:

☒ Soil

Area Treated	Square feet	Linear feet	Gallons Applied
<u>concrete/</u>	<u>5000</u>	<u>0</u>	<u>275</u>
<u>staircase</u>			
<u>under house</u>			

As per Florida Building Code 104.2.6 – If soil chemical barrier method for termite prevention is used, final exterior treatment shall be completed prior to final building approval.

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

11-10-16 3:11 BILL HENDRICKS
Date Time Print Technician's Name

Remarks: _____

Applicator - White

Permit File - Canary

Permit Holder - Pink

BOARD OF COUNTY COMMISSIONERS

OFFICE OF

BUILDING & ZONING

COLUMBIA COUNTY, FLORIDA

CERTIFICATE OF OCCUPANCY RECEIPT

RECEIPT NUMBER / PERMIT NUMBER 000034189 DATE 05/24/2017

APPLICANT CIMARON HOLT

OWNER CIMARON HOLT

CONTRACTOR CIMARON HOLT

PARCEL ID NUMBER 23-6S-15-00533-001 NUMBER OF EXISTING DWELLINGS 0

TYPE OF DEVELOPMENT SFD, UTILITY

HEATED FLOOR AREA 4464.00 TOTAL AREA 5344.00

FEES:

FIRE FEE (5 ACRES OR LESS) 76.40

FIRE FEE (MORE THAN 5 ACRES) _____

WASTE ASSESSMENT FEE 80.45

TOTAL ASSESSMENT FEES CHARGED 156.85

CHECK NUMBER 1106

MAKE CHECKS PAYABLE TO: BCC (Board of County Commissioners)

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



COLUMBIA COUNTY OFFICE COLUMBIA

OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

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

Parcel Number 23-6S-15-00533-001

Building permit No. 000034.189

Use Classification SFD, UTILITY

Fire: 76.40

Permit Holder CIMARON HOLT

Waste: 80.45

Owner of Building CIMARON HOLT

Total: 156.85

Location: 242 SW RIVERSIDE AVE, FORT WHITE, FL 32038

Date: 05/24/2017

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)



www.flapest.com

34189

CORPORATE HEADQUARTERS

P O BOX 5369
116 N W 16TH AVENUE
GAINESVILLE, FL 32627-5369

(352) 376-2661
FAX (352) 376-2791

SCIENTIFIC PEST CONTROL DIRECTED BY GRADUATE ENTOMOLOGISTS

Complete Pest Control Service
Member Florida & National Pest Control Associations

Reply 536 SE Baya Dr
Lake City, FL 32025
Phone (386) 752-1703 Fax (386) 752-0171

Cimaron Holt
242 SW Riverside Ave
Fort White, FL

TERMITE TREATMENT CERTIFICATION

Owner	Permit Number
Cimaron Holt	33842
Lot	Block
Subdivision	Street Address
	242 SW Riverside Ave
City	County
Fort White	Columbia
General Contractor	Area Treated
Cimaron Holt	114LF
Date	Time
05/23/17	4:50pm
Name of applicator	Applicator ID Number
Eric Doyle	JE257518
Product Used, Active Ingredient, % Concentration	Number of gallons used
Premise: Imidacloprid: 0.10%	25
Method of termite prevention treatment: Soil treatment	

The building has received a complete treatment for the prevention of subterranean termites.
Treatment is in accordance with rules and laws established by the Florida Department of Agriculture and Consumer Services.
This form is proof of complete treatment for Certificate of Occupancy or Closing.

THIS IS PROOF OF WARRANTY

Warranty and Treatment Certifications Have Been Issued.

Authorized Signature	Date
<i>Philipp Arnold</i>	5/24/2017

BRANCHES:

• Crystal River • Daytona Beach • Ft. Walton Beach • Jacksonville South • Jacksonville West • Lake City • Milton • Ocala • Orlando • Palatka • Panama City • Pensacola • Starke • St. Augustine • Tallahassee • Winter Haven • Leesburg • Kissimmee • Tampa •