

DATE 06/18/2010

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

PERMIT
000028671

APPLICANT LORI BOWMAN PHONE 754-7367
ADDRESS 582 NW BROOK LOOP LAKE CITY FL 32055
OWNER TERRANCE ANSBRO PHONE _____
ADDRESS 235 SW BUTTERFLY CT FT. WHITE FL 32038
CONTRACTOR ROGER WHIDDON PHONE 754-7367

LOCATION OF PROPERTY 41S, TR TUSTENUGGEE, TR SASMINE, TR BUTTERFLY COURT, TO THE
END ON RIGHT

TYPE DEVELOPMENT SFD, UTILITY ESTIMATED COST OF CONSTRUCTION 101900.00

HEATED FLOOR AREA 1390.00 TOTAL AREA 2038.00 HEIGHT _____ STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 6/12 FLOOR SLAB

LAND USE & ZONING A-3 MAX. HEIGHT _____


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

NO. EX.D.U. 0 FLOOD ZONE A DEVELOPMENT PERMIT NO. _____

PARCEL ID 07-6S-17-09621-411 SUBDIVISION _____

LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 10.00

000001829

Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number  Applicant/Owner/Contractor _____
WAIVER 10-284 BK _____ HD _____ Y _____
Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: ONE FOOT ABOVE RD (EASEMENT, NOC ON FILE

Check # or Cash 2717

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power _____ Foundation _____ Monolithic _____
date/app. by _____ date/app. by _____ date/app. by _____
Under slab rough-in plumbing _____ Slab _____ Sheathing/Nailing _____
date/app. by _____ date/app. by _____ date/app. by _____
Framing _____ Insulation _____
date/app. by _____ date/app. by _____
Rough-in plumbing above slab and below wood floor _____ Electrical rough-in _____
date/app. by _____ date/app. by _____
Heat & Air Duct _____ Peri. beam (Lintel) _____ Pool _____
date/app. by _____ date/app. by _____ date/app. by _____
Permanent power _____ C.O. Final _____ Culvert _____
date/app. by _____ date/app. by _____ date/app. by _____
Pump pole _____ Utility Pole _____ M/H tie downs, blocking, electricity and plumbing _____
date/app. by _____ date/app. by _____ date/app. by _____
Reconnection _____ RV _____ Re-roof _____
date/app. by _____ date/app. by _____ date/app. by _____

BUILDING PERMIT FEE \$ 510.00 CERTIFICATION FEE \$ 10.19 SURCHARGE FEE \$ 10.19

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

FLOOD DEVELOPMENT FEE \$ _____ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ _____ TOTAL FEE 605.38

INSPECTORS OFFICE  CLERKS OFFICE 

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

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

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

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

70

Columbia County Building Permit Application

☒ App Fee Paid

For Office Use Only Application # 1006-12 Date Received 6-4-10 By LH Permit # 1829/28671
Zoning Official BLK Date 17.06.10 Flood Zone A Land Use A-3 Zoning A-3
FEMA Map # 485C Elevation N/A MFE 1st River N/A Plans Examiner HO Date 6-16-10
Comments above Rd (Eisemond)
☒ NOC ☒ EH ☒ Deed or PA ☒ Site Plan ☒ State Road Info ☐ Parent Parcel # _____
☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter
IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____
School _____ = TOTAL N/A Suspended ☒ VF form

Septic Permit No. 10-284 Lori Bowman Fax 386-754-7367
Name Authorized Person Signing Permit Roger Whiddon Phone 386-754-7367
Address 582 NW Brook Loop, Lake City, FL 32055
Owners Name Terrance Ansbro Phone _____
911 Address 235 SW Butterfly Ct, Fort White FL 32038
Contractors Name Whiddon Construction Co Phone 386-754-7367
Address 582 NW Brook Loop, Lake City, FL 32055
Fee Simple Owner Name & Address _____
Bonding Co. Name & Address _____
Architect/Engineer Name & Address Tim Delbene Drafting & Tech. Serv., 192 SW Sawwood Hen, Lake City, 32024
Mortgage Lenders Name & Address _____

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress Energy
Property ID Number 07-65-17-09621-411 Estimated Cost of Construction \$100,000.00
Subdivision Name Tustnuggee Woods Lot 11 Block _____ Unit _____ Phase _____
Driving Directions South on Tustnuggee, Right on Sasmine
Right on Butterfly court, go to end of road, contractor
sign on right. Number of Existing Dwellings on Property none
Construction of New Home Total Acreage 10 Lot Size 671.5'
Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 16'
Actual Distance of Structure from Property Lines - Front 305' Side 175' Side 429' Rear 322'
Number of Stories 1 Heated Floor Area 1390 Total Floor Area 2038 Roof Pitch 6/12

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction. **CODE: Florida Building Code 2007 with 2009 Supplements and the 2008 National Electrical Code.**
Page 1 of 2 (Both Pages must be submitted together.) Revised 6-19-09
EH driveway 6/18/10 Spoke to Laurie 6/17/10 to call left message

Columbia County Building Permit Application

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

TIME LIMITATIONS OF PERMITS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the time work is commenced. A valid permit receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous approved inspection.

FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment: According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects to make other legally required payments, the people who are owed money may look to your property for payment, even if you have paid your contractor in full. This means if a lien is filed against your property, it could be sold against your will to pay for labor, materials or other services which your contractor may have failed to pay.

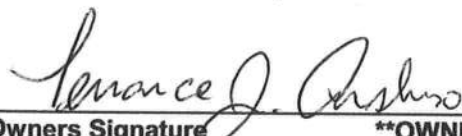
NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE: **YOU ARE HEREBY NOTIFIED** as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage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

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

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

NOTICE TO OWNER: There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. It may be to your advantage to check and see if your property is encumbered by any restrictions.

(Owners Must Sign All Applications Before Permit Issuance.)


Owners Signature

****OWNER BUILDERS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.**

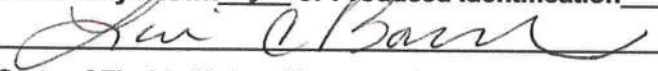
CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.


Contractor's Signature (Permitee)

Contractor's License Number CRC1328025
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 1st day of June 2010.

Personally known ☒ or Produced Identification _____

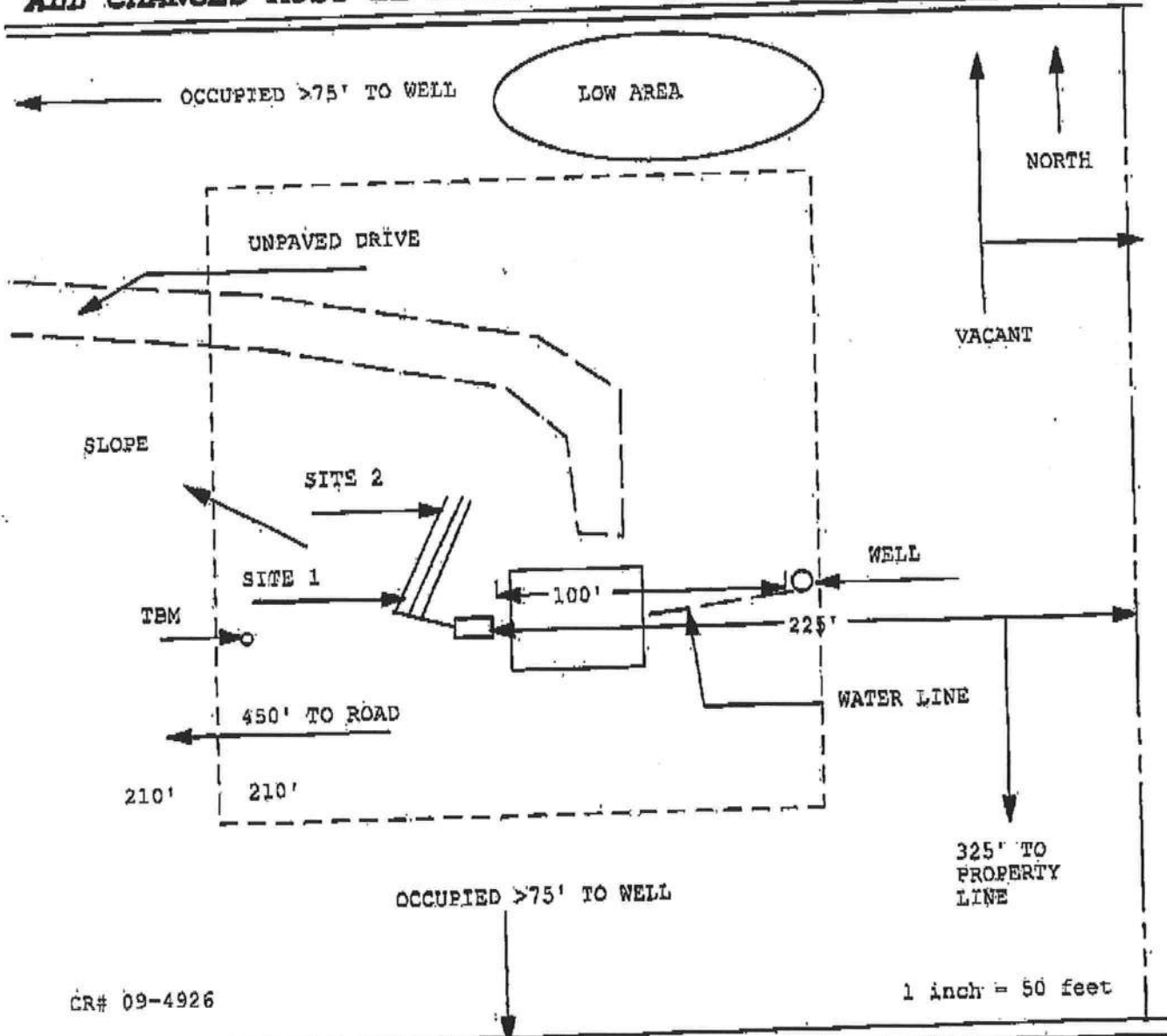

State of Florida Notary Signature (For the Contractor)

SEAL:

LORI C. BOWMAN
Notary Public, State of Florida
My comm. exp. June 19, 2013
Comm. No. DD 879648

**Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan**
Permit Application Number: 10-0284

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Paul R. Rangel Date 6/1/10
 Plan: Approved X Not Approved Date 6/1/10
 By [Signature] **Columbia CHD** CPHU
 Notes: please see attached for full dim

ST

SUBCONTRACTOR VERIFICATION FORM

*Copy - Will be sending in the updated sheet
6-4-10 LH.*

APPLICATION NUMBER 1006-12 CONTRACTOR Roger Whiddon PHONE 867-0812
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 871	Print Name <u>Dennis Conklin</u> License #: <u>EC 13003800</u>	Signature <u>[Signature]</u> Phone #: <u>386 623 9055</u>
MECHANICAL/A/C A	Print Name <u>Joe Davis</u> License #: <u>CAC 1816529</u>	Signature <u>See Attached</u> Phone #: <u>386.623.3487</u>
PLUMBING/GAS	Print Name <u>Dan Weiland</u> License #: <u>CFC1426221</u>	Signature <u>[Signature]</u> Phone #: <u>758-3570</u>
ROOFING 760	Print Name <u>Roger Whiddon</u> License #: <u>CRC 1328025</u>	Signature <u>[Signature]</u> Phone #: <u>867.0812</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	N/A		
CONCRETE FINISHER	000 842	<u>Southern Carrock / Robert Skeon</u>	<u>[Signature]</u>
FRAMING	000 252	<u>Glen Keen</u>	<u>[Signature]</u>
INSULATION	000 628	<u>Bobby Jackson</u>	<u>See Attached</u>
STUCCO	N/A		
DRYWALL	000 627	<u>Bobby Jackson</u>	<u>See Attached</u>
PLASTER	N/A		
CABINET INSTALLER	CRC 1328025	<u>Roger Whiddon</u>	<u>[Signature]</u>
PAINTING	CRC 1328025	<u>Roger Whiddon</u>	<u>[Signature]</u>
ACOUSTICAL CEILING	N/A		
GLASS	CRC 1328025	<u>Roger Whiddon</u>	<u>[Signature]</u>
CERAMIC TILE	CRC 1328025	<u>Roger Whiddon</u>	<u>[Signature]</u>
FLOOR COVERING	CRC 1328025	<u>Roger Whiddon</u>	<u>[Signature]</u>
ALUM/VINYL SIDING	N/A		
GARAGE DOOR	N/A		
METAL BLDG ERECTOR	N/A		

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 1006-12 CONTRACTOR Roger Whidden PHONE 386-754-7367
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

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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	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL C/A/C A Vok	Print Name <u>Joseph W Davis II</u> License #: <u>CAC1816529</u>	Signature <u>[Signature]</u> Phone #: <u>386-623-3487</u>
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 #: _____

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

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

Contractor Form: Subcontractor form: 6/08

JUN-7-2010 10:06A FROM: JACKSON DRYWALL & TE 3863084895

TO: 7547367

P.1

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR

Jackson Drywall

PHONE

386-963-1515

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

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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	Print Name _____ License #: _____	Signature _____ Phone #: _____
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	Subcontractor's Printed Name	Subcontractor's Signature
MASON			
CONCRETE FINISHER			
FRAMING			
* INSULATION ✓ OK	000628	Bobby Jackson	<i>Bobby Jackson</i>
STUCCO			
* DRYWALL ✓ OK	000627	Bobby Jackson	<i>Bobby Jackson</i>
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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

Contractor Form: Subcontractor form: 6/08



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

6-25-09

Whiddow construction

**MINIMUM PLAN REQUIREMENTS FOR THE
FLORIDA BUILDING CODE RESIDENTIAL 2007 EFFECTIVE 1 MARCH 2009 & 2009
SUPPLEMENTS EFFECTIVE 1 MARCH 2009, ONE (1) AND TWO (2) FAMILY DWELLINGS
with Supplements and Revision, OF THE NATIONAL ELECTRICAL 2008**

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

**ALL BUILDING PLANS MUST INDICATE COMPLIANCE with the Current 2007
FLORIDA BUILDING CODES RESIDENTIAL EFFECTIVE 1 MARCH 2009 & 2009
SUPPLEMENTS EFFECTIVE 1 MARCH 2009. ALL PLANS OR DRAWINGS SHALL
PROVIDE CALCULATIONS AND DETAILS THAT HAVE THE SEAL AND
SIGNATURE OF A CERTIFIED ARCHITECT OR ENGINEER REGISTERED IN THE
STATE OF FLORIDA, OR ALTERNATE METHODOLOGIES, APPROVED BY THE
STATE OF FLORIDA BUILDING COMMISSION FOR ONE-AND-TWO FAMILY
DWELLINGS.**

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

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

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

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

Items to Include-
Each Box shall be
Circled as
Applicable

		Yes	No	N/A
1	Two (2) complete sets of plans containing the following:	<input checked="" type="checkbox"/>		
2	All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void	<input checked="" type="checkbox"/>		
3	Condition space (Sq. Ft.)			
	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"/>		
5	Dimensions of all building set backs	<input checked="" 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"/>		
7	Provide a full legal description of property.	<input checked="" type="checkbox"/>		

Wind-load Engineering Summary, calculations and any details required

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

Elevations Drawing including:

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

Floor Plan including:

20	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	✓		
21	Raised floor surfaces located more than 30 inches above the floor or grade	✓		
22	All exterior and interior shear walls indicated	✓		
23	Shear wall opening shown (Windows, Doors and Garage doors)	✓		
24	Show compliance with Section FBCR 310 Emergency escape and rescue opening shown in each bedroom (net clear opening shown) and Show compliance with Section FBCR 613.2 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 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 322)			✓

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

<p align="center">GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</p>	<p align="center">Items to Include- Each Box shall be Circled as Applicable</p>
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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 320: PROTECTION AGAINST TERMITES

36	Indicate on the foundation plan if soil treatment is used for subterranean termite prevention or Sub mit 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 & interior of the areas structural panel sheathing			✓
49	Show Draftstopping, Fire caulking and Fire blocking			✓
50	Show fireproofing requirements for garages attached to living spaces, per FBCR section 309			✓
51	Provide live and dead load rating of floor framing systems (psf).			✓

FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION

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

FBCR :ROOF SYSTEMS:

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

FBCR 802:Conventional Roof Framing Layout

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

FBCR Table 602.3(2) & FBCR 803 ROOF SHEATHING

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

FBCR ROOF ASSEMBLIES FRC Chapter 9

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

FBCR Chapter 11 Energy Efficiency Code for residential building

Residential construction shall comply with this code by using the following compliance methods in the FBCR chapter 11 Residential buildings compliance methods. **Two of the required forms are to be submitted, N1100.1.1.1 As an alternative to the computerized Compliance Method A, the Alternate Residential Point System Method hand calculation, Alternate Form 600A, may be used. All requirements specific to this calculation are located in Sub appendix C to Appendix G. Buildings complying by this alternative shall meet all mandatory requirements of this chapter. Computerized versions of the Alternate Residential Point System Method shall not be acceptable for code compliance.**

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	✓		
74	Attic space	✓		
75	Exterior wall cavity	✓		
76	Crawl space			✓

HVAC information

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

Plumbing Fixture layout shown

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

Private Potable Water

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

Electrical layout shown including

85	Show Switches, receptacles outlets, lighting fixtures and Ceiling fans	✓		
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	✓		
87	Show the location of smoke detectors & Carbon monoxide detectors	✓		
88	Show service panel, sub-panel, location(s) and total ampere ratings	✓		
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	✓		
90	Appliances and HVAC equipment and disconnects	✓		
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.	✓		

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.

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

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS

		YES	NO	N/A
92	Building Permit Application A current Building Permit Application form is to be completed and submitted for all residential projects	✓		
93	Parcel Number The parcel number (Tax ID number) from the Property Appraiser (386) 758-1084 is required. A copy of property deed is also requested	✓		
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 permit showing an approved waste water sewer tap			✓
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 base flood elevation (100 year flood) has been established			✓
100	A development permit will also be required. 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. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver (\$50.00). All culvert waivers are sent to the Columbia County Public Works Department for approval or denial.			✓
102	911 Address: If the project is located in an area where a 911 address has not been issued, then application for a 911 address must be applied for and received through the Columbia County Emergency Management Office of 911 Addressing Department (386) 758-1125	✓		

Section R101.2.1 of the Florida Building Code Residential:

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

Section 105 of the Florida Building Code defines the:

Time limitation of application.

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

Single-family residential dwelling.

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

Permit intent.

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

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs Residential Performance Method A

Project Name: Ansbro Residence
 Street: SW Butterfly Ct
 City, State, Zip: Ft White, FL, 32038-
 Owner: Terry Ansbro
 Design Location: FL, Gainesville

Builder Name: Whiddon Construction
 Permit Office: Columbia County
 Permit Number: 28671
 Jurisdiction: 121000

1. New construction or existing	New (From Plans)	
2. Single family or multiple family	Single-family	
3. Number of units, if multiple family	1	
4. Number of Bedrooms	2	
5. Is this a worst case?	No	
6. Conditioned floor area (ft ²)	1390	
7. Windows	Description	Area
a. U-Factor:	Dbl, U=0.80	134.00 ft ²
SHGC:	SHGC=0.70	
b. U-Factor:	Dbl, U=0.55	9.00 ft ²
SHGC:	SHGC=0.60	
c. U-Factor:	N/A	ft ²
SHGC:		
d. U-Factor:	N/A	ft ²
SHGC:		
e. U-Factor:	N/A	ft ²
SHGC:		
8. Floor Types	Insulation	Area
a. Slab-On-Grade Edge Insulation	R=0.0	1390.00 ft ²
b. N/A	R=	ft ²
c. N/A	R=	ft ²

9. Wall Types	Insulation	Area
a. Frame - Wood, Exterior	R=19.0	1221.30 ft ²
b. N/A	R=	ft ²
c. N/A	R=	ft ²
d. N/A	R=	ft ²
10. Ceiling Types	Insulation	Area
a. Under Attic (Vented)	R=30.0	1390.00 ft ²
b. N/A	R=	ft ²
c. N/A	R=	ft ²
11. Ducts		
a. Sup: Attic Ret: Attic AH: Interior Sup. R= 6,	348 ft ²	
12. Cooling systems		
a. Central Unit	Cap: 35 kBtu/hr	SEER: 14
13. Heating systems		
a. Electric Heat Pump	Cap: 35 kBtu/hr	HSPF: 7.7
14. Hot water systems		
a. Electric	Cap: 30 gallons	EF: 0.92
b. Conservation features	None	
15. Credits	Pstat	

Glass/Floor Area: 0.103

Total As-Built Modified Loads: 23.45

Total Baseline Loads: 30.95

PASS

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

PREPARED BY: T. WhiddonDATE: 5/23/10

I hereby certify that this building, as designed, is in compliance with the Florida Energy Code.

OWNER/AGENT: _____

DATE: _____

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance with Section 553.908 Florida Statutes.



BUILDING OFFICIAL: _____

DATE: _____

PROJECT

Title:	Ansbro Residence	Bedrooms:	2	Address Type:	Street Address
Building Type:	FLAsBuilt	Bathrooms:	0	Lot #	11
Owner:	Terry Ansbro	Conditioned Area:	1390	SubDivision:	TustenuggeeHill
# of Units:	1	Total Stories:	1	PlatBook:	
Builder Name:	Whiddon Construction	Worst Case:	No	Street:	SW Butterfly Ct
Permit Office:	Columbia County	Rotate Angle:	0	County:	Columbia
Jurisdiction:	121000	Cross Ventilation:		City, State, Zip:	Ft White ,
Family Type:	Single-family	Whole House Fan:			FL , 32038-
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, Gainesville	FL_GAINESVILLE_REGI	2	32	92	75	70	1305.5	51	Medium

FLOORS

✓	#	Floor Type	Perimeter	R-Value	Area	Tile	Wood	Carpet
✓	1	Slab-On-Grade Edge Insulatio	152.67 ft	0	1390 ft²	0.4	0	0.6

ROOF

✓	#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	Tested	Deck Insul.	Pitch
✓	1	Gable or shed	Composition shingles	1555 ft²	348 ft²	Medium	0.96	No	0	26.6 deg

ATTIC

✓	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
✓	1	Full attic	Vented	300	1390 ft²	N	N

CEILING

✓	#	Ceiling Type	R-Value	Area	Framing Frac	Truss Type
✓	1	Under Attic (Vented)	30	1390 ft²	0.11	Wood

WALLS

✓	#	Ornt	Adjacent To	Wall Type	Cavity R-Value	Area	Sheathing R-Value	Framing Fraction	Solar Absor.
✓	1	N	Exterior	Frame - Wood	19	370.67 ft²		0.23	0.75
✓	2	E	Exterior	Frame - Wood	19	240 ft²		0.23	0.75
✓	3	S	Exterior	Frame - Wood	19	370.67 ft²		0.23	0.75
✓	4	W	Exterior	Frame - Wood	19	240 ft²		0.23	0.75

DOORS

✓	#	Ornt	Door Type	Storms	U-Value	Area
✓	1	S	Insulated	None	0.46	20 ft²
✓	2	N	Insulated	None	0.46	20 ft²

WINDOWS

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

✓	#	Ornt	Frame	Panes	NFRC	U-Factor	SHGC	Storms	Area	Overhang		Int Shade	Screening
										Depth	Separation		
✓	1	N	Metal	Low-E Double	Yes	0.55	0.6	N	9 ft²	10 ft 0 in	0 ft 4 in	HERS 2006	None
✓	2	N	Metal	Low-E Double	Yes	0.8	0.7	N	20 ft²	10 ft 0 in	0 ft 4 in	HERS 2006	None
✓	3	E	Metal	Low-E Double	Yes	0.8	0.7	N	3 ft²	2 ft 0 in	8 ft 0 in	HERS 2006	None
✓	4	E	Metal	Low-E Double	Yes	0.8	0.7	N	15 ft²	2 ft 0 in	8 ft 0 in	HERS 2006	None
✓	5	S	Metal	Low-E Double	Yes	0.8	0.7	N	75 ft²	10 ft 0 in	0 ft 4 in	HERS 2006	None
✓	6	W	Metal	Low-E Double	Yes	0.8	0.7	N	15 ft²	2 ft 0 in	8 ft 0 in	HERS 2006	None
✓	7	W	Metal	Low-E Double	Yes	0.8	0.7	N	6 ft²	2 ft 0 in	8 ft 0 in	HERS 2006	None

INFILTRATION & VENTING

✓	Method	SLA	CFM 50	ACH 50	ELA	EqLA	---- Forced Ventilation ----		Run Time	Fan
							Supply CFM	Exhaust CFM	Fraction	Watts
✓	Default	0.00036	1313	7.08	72.1	135.5	0 cfm	0 cfm	0	0

COOLING SYSTEM

✓	#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Ductless
✓	1	Central Unit	None	SEER: 14	35 kBtu/hr	1050 cfm	0.75	False

HEATING SYSTEM

✓	#	System Type	Subtype	Efficiency	Capacity	Ductless
✓	1	Electric Heat Pump	None	HSPF: 7.7	35 kBtu/hr	False

HOT WATER SYSTEM

✓	#	System Type	EF	Cap	Use	SetPnt	Conservation
✓	1	Electric	0.92	30 gal	50 gal	120 deg	None

SOLAR HOT WATER SYSTEM

✓	FSEC	Company Name	System Model #	Collector Model #	Collector Area	Storage Volume	FEF
	Cert #						
✓	None	None			ft²		

DUCTS

✓	#	---- Supply ----			---- Return ----		Leakage Type	Air Handler	CFM 25	Percent Leakage	QN	RLF
		Location	R-Value	Area	Location	Area						
	1	Attic	6	348 ft²	Attic	69.5 ft²	Default Leakage	Interior				

TEMPERATURES

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

Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: SW Butterfly Ct
Ft White, FL, 32038-

PERMIT #:

INFILTRATION REDUCTION COMPLIANCE CHECKLIST

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	N1106.AB.1.1	Maximum: .3 cfm/sq.ft. window area; .5 cfm/sq.ft. door area.	✓
Exterior & Adjacent Walls	N1106.AB.1.2.1	Caulk, gasket, weatherstrip or seal between: windows/doors & frames, surrounding wall; foundation & wall sole or sill plate; joints between exterior wall panels at corners; utility penetrations; between wall panels & top/bottom plates; between walls and floor. EXCEPTION: Frame walls where a continuous infiltration barrier is installed that extends from, and is sealed to, the foundation to the top plate.	✓
Floors	N1106.AB.1.2.2	Penetrations/openings > 1/8" sealed unless backed by truss or joint members. EXCEPTION: Frame floors where a continuous infiltration barrier is installed that is sealed to the perimeter, penetrations and seams.	✓
Ceilings	N1106.AB.1.2.3	Between walls & ceilings; penetrations of ceiling plane to top floor; around shafts, chases, soffits, chimneys, cabinets sealed to continuous air barrier; gaps in gyp board & top plate; attic access. EXCEPTION: Frame ceilings where a continuous infiltration barrier is installed that is sealed at the perimeter, at penetrations and seams.	✓
Recessed Lighting Fixtures	N1106.AB.1.2.4	Type IC rated with no penetrations, sealed; or Type IC or non-IC rated, installed inside a sealed box with 1/2" clearance & 3" from insulation; or Type IC with < 2.0 cfm from conditioned space, tested.	✓
Multi-story Houses	N1106.AB.1.2.5	Air barrier on perimeter of floor cavity between floors.	N/A
Additional Infiltration reqts	N1106.AB.1.3	Exhaust fans vented to outdoors, dampers; combustion space heaters comply with NFPA, have combustion air.	✓

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

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	N1112.AB.3	Comply with efficiency requirements in Table N112.ABC.3. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required.	✓
Swimming Pools & Spas	N1112.AB.2.3	Spas & heated pools must have covers (except solar heated). Non-commercial pools must have a pump timer. Gas spa & pool heaters must have a minimum thermal efficiency of 78%. Heat pump pool heaters shall have a minimum COP of 4.0.	N/A
Shower heads	N1112.AB.2.4	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG.	✓
Air Distribution Systems	N1110.AB	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated and installed in accordance with the criteria of Section N1110.AB. Ducts in unconditioned attics: R-6 min. insulation.	✓
HVAC Controls	N1107.AB.2	Separate readily accessible manual or automatic thermostat for each system.	✓
Insulation	N1104.AB.1 N1102.B.1.1	Ceilings-Min. R-19. Common walls-frame R-11 or CBS R-3 both sides. Common ceiling & floors R-11.	✓

STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
ONSITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT
Authority: Chapter 381, FS & Chapter 10D-6, FAC

PERMIT # _____
DATE PAID _____
FEE PAID \$ _____
RECEIPT # _____
CR # 09-4926

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Temporary/Experimental System
☐ Repair ☐ Abandonment ☐ Other (Specify) _____

APPLICANT: TERRANCE J. ANSBRO

TELEPHONE: 754-7367

AGENT: WHIDDON CONSTRUCTION

MAILING ADDRESS: 582 NWBROOKLOOP CITY: LAKE CITY STATE: FL ZIP: 32055

=====

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. ATTACH BUILDING PLAN AND TO-SCALE SITE PLAN SHOWING PERTINENT FEATURES REQUIRED BY CHAPTER 10D-6, FLORIDA ADMINISTRATIVE CODE.

=====

PROPERTY INFORMATION [IF LOT IS NOT IN A RECORDED SUBDIVISION, ATTACH LEGAL DESCRIPTION OR DEED]

LOT: _____ BLOCK: _____ SUBDIVISION: _____ MEETS & BOUNDS _____ DATE SUBD: _____

PROPERTY ID #: 07-6S-17-09621-411 [Section/Township/Range/Parcel] ZONING: RES

PROPERTY SIZE: 10.02 ACRES [Sqft/43560] PROPERTY WATER SUPPLY: ☒ PRIVATE ☐ PUBLIC

PROPERTY STREET ADDRESS: SW BUTTERFLY COURT

DIRECTIONS TO PROPERTY: 41 SOUTH TURN RIGHT ON TUSTENNUGGEE RD. TURN RIGHT ON JSAMINE TURN RIGHT ON BUTTERFLY, TO END ON RIGHT.

BUILDING INFORMATION ☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	# Persons Served	Business Activity For Commercial Only
1	<u>HOUSE</u>	<u>2</u>	<u>1390</u>	<u>1</u>	_____
2	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____

[N] Garbage Grinders/Disposals [N] Spas/Hot Tubs [N] Floor/Equipment Drain
[N] Ultra-low Volume Flush Toilets [N] Other' (Specify) _____

APPLICANT'S SIGNATURE: _____ DATE: _____

STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
ONSITE SEWAGE DISPOSAL SYSTEM
SITE EVALUATION AND SYSTEM SPECIFICATIONS

PERMIT #
CR # 09-4926

APPLICANT: TERRANCE J. ANSBRO

AGENT: WHIDDON CONSTRUCTION

LOT: _____ BLOCK: _____ SUBDIVISION: MEETS & BOUNDS

PROPERTY ID #: 07-6S-17-09621-411 [SECTION/TOWNSHIP/RANGE/PARCEL NO. OR TAX ID NUMBER]

TO BE COMPLETED BY ENGINEER, HEALTH UNIT EMPLOYEE OR OTHER QUALIFIED PERSON. ENGINEER'S MUST PROVIDE REGISTRATION NO. AND SIGN AND SEAL EACH PAGE OF SUBMITTAL. COMPLETE ALL ITEMS.

PROPERTY SIZE CONFORMS TO SITE PLAN: ☒ YES ☐ NO NET USABLE AREA AVAILABLE: 10.02 ACRES
TOTAL ESTIMATED SEWAGE FLOW: 300 GALLONS PER DAY [RESIDENCES-TABLE-1 / OTHER-TABLE-2]
AUTHORIZED SEWAGE FLOW: 15,030 GALLONS PER DAY [1500 GPD/ACRE OR 2500 GPD/ACRE]
UNOBSTRUCTED AREA AVAILABLE: >2000 SQFT UNOBSTRUCTED AREA REQUIRED: 563 SQFT

BENCHMARK/REFERENCE POINT LOCATION: NAIL IN 30" OAK WEST OF SYSTEM SITE
ELEVATION OF PROPOSED SYSTEM SITE IS 24 INCHES [BELOW] BENCHMARK/REFERENCE POINT.

THE MINIMUM SETBACK WHICH CAN BE MAINTAINED FROM THE PROPOSED SYSTEM TO THE FOLLOWING FEATURE:
SURFACE WATER: N/A FT DITCHES/SWALES: 450 FT NORMALLY WET? ☐ YES ☒ NO
WELLS: PUBLIC: N/A FT LIMITED USE: N/A FT PRIVATE: 100 FT NON-POTABLE: N/A FT
BUILDING FOUNDATIONS: 5 FT PROPERTY LINES: 225 FT POTABLE WATER LINES: 45 FT

SITE SUBJECT TO FREQUENT FLOODING: ☐ YES ☒ NO 10 YEAR FLOODING? ☐ YES ☒ NO
10 YEAR FLOOD ELEVATION FOR SITE: N/A FT MSL/NGVD SITE ELEVATION: N/A FT MSL/NGVD

SOIL PROFILE INFORMATION SITE 1 E/E-24" Below SOIL PROFILE INFORMATION SITE 2 E/E-24" Below

Munsell #/Color	Texture	Depth
10YR 4/2	FS	0 to 16
10YR 5/3	FS	16 to 27
10YR 6/2	FS	27 to 48
10YR 7/2	FS	48 to 72
		to
		to
		to
		to
10YR 7/4	CMN/DST	48 to

USDA SOIL SERIES: ALPIN LIKE

Munsell #/Color	Texture	Depth
10YR 4/2	FS	0 to 20
10YR 5/3	FS	20 to 34
10YR 6/2	FS	34 to 54
10YR 7/2	FS	54 to 72
		to
		to
		to
		to

USDA SOIL SERIES: ALPIN LIKE

OBSERVED WATER TABLE: >72 INCHES [ABOVE / BELOW] EXISTING GRADE. TYPE: [APPARENT]
ESTIMATED WET SEASON WATER TABLE ELEVATION: 48 INCHES [ABOVE / BELOW] EXISTING GRADE
HIGH WATER TABLE VEGETATION: ☐ YES ☒ NO MOTTLING: ☒ YES ☐ NO DEPTH: 48 INCHES

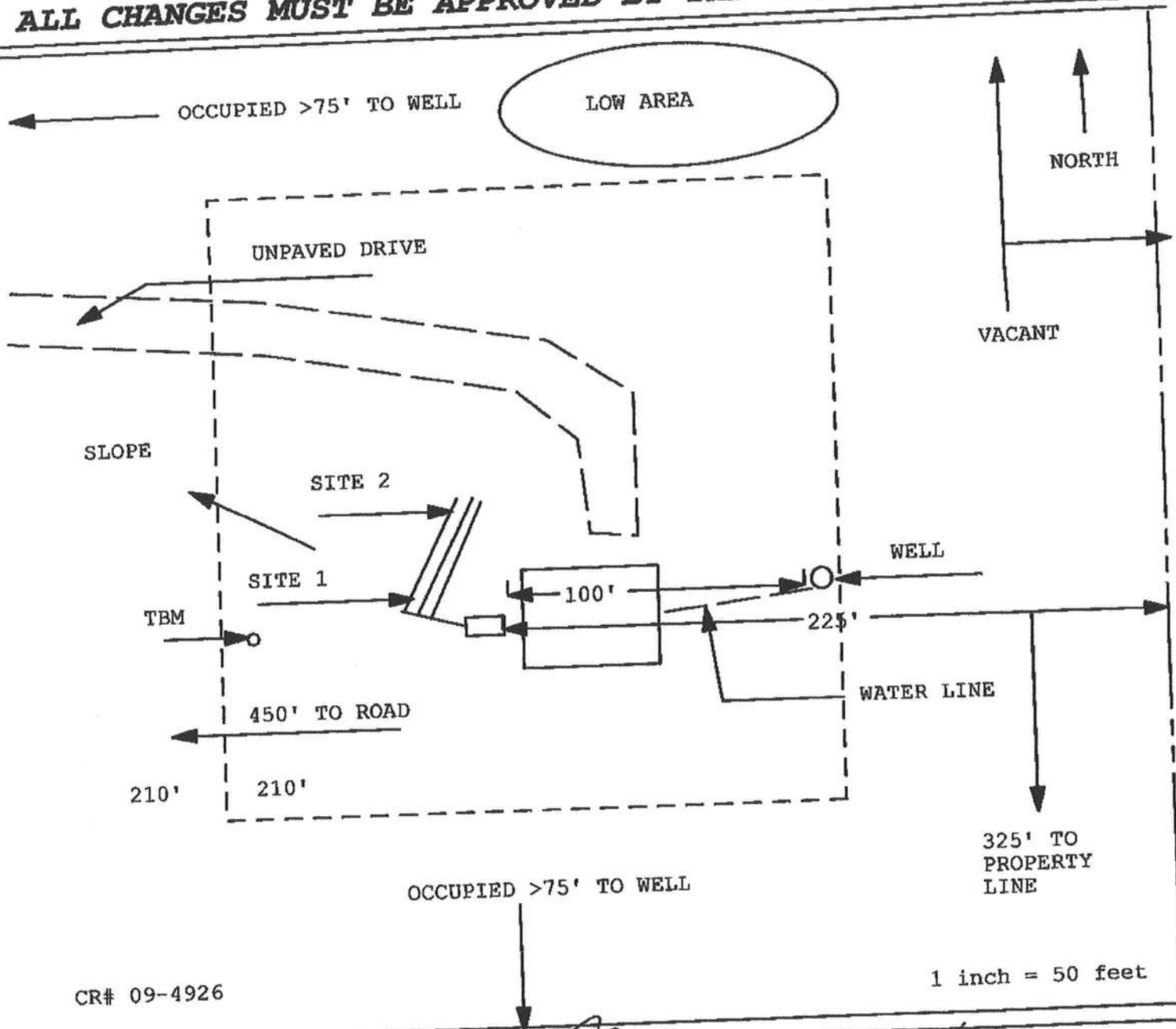
SOIL TEXTURE/LOADING RATE FOR SYSTEM SIZING: FS / 0.8 DEPTH OF EXCAVATION: 0 INCHES
DRAINFIELD CONFIGURATION: ☒ TRENCH ☐ BED [OTHER (SPECIFY) _____]
REMARKS/ADDITIONAL CRITERIA: _____

SITE EVALUATED BY: Paul R. [Signature] DATE: June 01 2010

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan

Permit Application Number: _____

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Paul R. Royal Date 6/1/10
Plan Approved _____ Not Approved _____ Date _____

By _____ CPHU

Notes: _____

Prepared by and return to:
Susan Shattler

Home Town Title of North Florida
2744 US Highway 90 West
Lake City, FL 32055
386-754-7175
File Number: 2005-914

Inst: [REDACTED] Date: 05/12/2005 Time: 12:38
Doc Stamp-Deed : 461.30
mk DC, P. Dewitt Cason, Columbia County B: 1045 P: 2706

[Space Above This Line For Recording Data]

Warranty Deed

This Warranty Deed made this 3rd day of May, 2005 between David Poppell and Brenda K. Poppell, husband and wife whose post office address is 11378 S.W. Tustenuggee Avenue, Fort White, FL 32038, grantor, and Terrance J. Ansbro, a single man whose post office address is 5897 North Dixie Hwy, Apartment 22, Oakland Park, FL, 33334 grantee:

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

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in **Columbia County, Florida** to-wit:

Lot 11 OF TUSTENUGGEE WOODS, AN UNRECORDED SUBDIVISION:

COMMENCE AT THE SOUTHWEST CORNER OF SECTION 7, TOWNSHIP 6 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA AND RUN THENCE SOUTH 89 DEG. 38 MIN. 15 SEC. EAST ALONG THE SOUTH LINE OF SAID SECTION 7, 1257.24 FEET; THENCE NORTH 00 DEG. 20 MIN. 48 SEC. EAST, 667.95 FEET; THENCE SOUTH 89 DEG. 38 MIN. 15 SEC. EAST, 17.07 FEET; THENCE NORTH 00 DEG. 20 MIN. 48 SEC. EAST, 671.46 FEET; THENCE SOUTH 89 DEG. 38 MIN. 15 SEC. EAST, 2600.12 FEET TO THE POINT OF BEGINNING; THENCE CONTINUE SOUTH 89 DEG. 38 MIN. 15 SEC. EAST, 650.03 FEET TO THE WEST LINE OF TUSTENUGGEE RIDGE, A SUBDIVISION ACCORDING TO PLAT THEREOF RECORDED IN PLAT BOOK 6, PAGE 212 OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA; THENCE NORTH 00 DEG. 20 MIN. 48 SEC. EAST ALONG SAID WEST LINE, 671.46 FEET; THENCE NORTH 89 DEG. 38 MIN. 15 SEC. WEST, 650.03 FEET; THENCE SOUTH 00 DEG. 20 MIN. 48 SEC. WEST, 671.46 FEET TO THE POINT OF BEGINNING. SAID LAND BEING SUBJECT TO A CUL-DE-SAC EASEMENT IN THE SOUTHWEST CORNER THEREOF.

TOGETHER WITH:

60-FT. ROAD EASEMENT IN TUSTENUGGEE WOODS:

A STRIP OF LAND 60 FEET IN WIDTH BEING 30 FEET EACH SIDE OF A CENTERLINE DESCRIBED AS FOLLOWS: COMMENCE AT THE SOUTHWEST CORNER OF SECTION 7, TOWNSHIP 6 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA, AND RUN THENCE SOUTH 89 DEG. 38 MIN. 15 SEC. EAST ALONG THE SOUTH LINE OF SAID SECTION 7, 1257.24 FEET; THENCE NORTH 00 DEG. 20 MIN. 48 SEC. EAST, 667.95 FEET; THENCE SOUTH 89 DEG. 38 MIN. 15 SEC. EAST, 17.07 FEET TO REFERENCE POINT "L" AND THE POINT OF BEGINNING; THENCE CONTINUE SOUTH 89 DEG. 38 MIN. 15 SEC. EAST, 1300.06 FEET TO REFERENCE POINT "M"; THENCE CONTINUE SOUTH 89 DEG. 38 MIN. 15 SEC. EAST, 1300.06 FEET TO REFERENCE POINT "N"; THENCE CONTINUE SOUTH 89 DEG. 38 MIN. 15 SEC. EAST, 1333.47 FEET TO THE WEST RIGHT OF WAY LINE OF COUNTY ROAD NO. C-131 AND THE POINT OF TERMINATION. ALSO BEGIN AT REFERENCE POINT "L" AND RUN THENCE NORTH 00 DEG. 20 MIN. 48 SEC. EAST, 671.46 FEET TO THE CENTERPOINT OF A CUL-DE-SAC HAVING A RADIUS OF 50 FEET AND THE POINT OF TERMINATION. ALSO BEGIN AT REFERENCE POINT "M" AND RUN THENCE NORTH 00 DEG. 20 MIN. 48 SEC. EAST, 2014.38 FEET AND THE POINT OF TERMINATION. ALSO BEGIN AT REFERENCE POINT "N" AND RUN THENCE NORTH 00 DEG. 20 MIN. 48 SEC. EAST, 671.46 FEET TO THE CENTERPOINT OF A CUL-DE-SAC HAVING A RADIUS OF 50 FEET AND THE POINT OF TERMINATION.

Parcel Identification Number: R09621-411

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

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

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to **December 31, 2004**.

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

Inst: [REDACTED] Date: 05/12/2005 Time: 12:38

Doc Stamp-Deed : 461.30

DC, P. Dewitt Cason, Columbia County B: 1045 P: 2787

Signed, sealed and delivered in our presence:

Tina S. Melgaard

Witness Name: TINA S. MELGAARD

Susan Smatter

Witness Name: Susan Smatter

David Poppell (Seal)
David Poppell

Brenda K. Poppell (Seal)
Brenda K. Poppell

Inst:2005011225 Date:05/12/2005 Time:12:38

Doc Stamp-Deed : 461.30

DC,P.DeWitt Cason,Columbia County B:1045 P:2788

State of Florida
County of Columbia

The foregoing instrument was acknowledged before me this 3rd day of May, 2005 by David Poppell and Brenda K. Poppell, who ☐ are personally known or ☒ have produced a driver's license as identification.

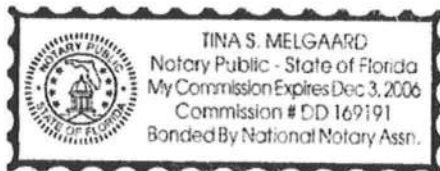
[Notary Seal]

Tina S. Melgaard
Notary Public

TINA S. MELGAARD

Printed Name: _____

My Commission Expires: _____



NOTICE OF COMMENCEMENT

County Clerk's Office Stamp or Seal

Tax Parcel Identification Number 07-65-17-09621-411

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

1. Description of property (legal description): Lot 11, Tustenvogge Woods (UNREC) IN SECTION 7, T-6-S, R-17-E, Columbia County, FL
 - a) Street (job) Address: _____
2. General description of improvements: New Home Construction
3. Owner Information
 - a) Name and address: Terrance Ansbro, 225 SW Wise Dr, Lake City, FL 32024
 - b) Name and address of fee simple titleholder (if other than owner) -
 - c) Interest in property -
4. Contractor Information
 - a) Name and address: Whiddon Construction 582 New Brook Loop, Lake City, FL 32055
 - b) Telephone No.: 386-754-7367 Fax No. (Opt.) 386-754-7367
5. Surety Information
 - a) Name and address: -
 - b) Amount of Bond: _____
 - c) Telephone No.: _____ Fax No. (Opt.) _____
6. Lender
 - a) Name and address: -
 - b) Phone No.: _____
7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served:
 - a) Name and address: _____
 - b) Telephone No.: _____ Fax No. (Opt.) _____
8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(l)(b), Florida Statutes:
 - a) Name and address: _____
 - b) Telephone No.: _____ Fax No. (Opt.) _____
9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified): _____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

STATE OF FLORIDA
COUNTY OF COLUMBIA

10. Terrance J. Ansbro
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager
TERRANCE J. ANSBRO
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 28th day of May, 20 10, by:
Terrance Ansbro as _____ (type of authority, e.g. officer, trustee, attorney
fact) for _____ (name of party on behalf of whom instrument was executed).

Personally Known _____ OR Produced Identification ☒ Type FLDL

Notary Signature Lori C. Bowman Notary Stamp or Seal:

LORI C. BOWMAN
Notary Public, State of Florida
My comm. exp. June 19, 2013
Comm. No. DD 879648

11. Verification 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.

Terrance J. Ansbro
Signature of Natural Person Signing (in line #10 above.)

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787

PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_uroft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for assigning and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Service Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County.

DATE REQUESTED: 6/1/2010 DATE ISSUED: 6/2/2010

ENHANCED 9-1-1 ADDRESS:

235 SW BUTTERFLY CT
FORT WHITE FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

07-6S-17-09621-411

Remarks:

LOT 11 TUSTENUGGEE WOODS S/D UNREC

Address Issued By: 
Columbia County 9-1-1 Addressing / GIS Department

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION INFORMATION BE FOUND TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.

1743



1006-12



COLUMBIA COUNTY BUILDING DEPARTMENT
LETTER OF AUTHORIZATION TO SIGN FOR PERMITS
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

I, Roger Whiddon (license holder name), licensed qualifier
for Whiddon Construction Co., Inc. (company name), do certify that
the below referenced person(s) listed on this form is/are employed by me directly or through an
employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in
Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and
control and is/are authorized to purchase permits, call for inspections, and sign on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Lori Bowman</u>	1. <u>Lori C Bowman</u>
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances. I understand that the State and County Licensing Boards have the power and
authority to discipline a license holder for violations committed by him/her, his/her agents,
officers, or employees and that I have full responsibility for compliance with all statutes, codes
and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you
must notify this department in writing of the changes and submit a new letter of authorization
form which will supersede all previous lists. Failure to do so may allow unauthorized persons to
use your name and/or license number to obtain permits.

R Whiddon

License Holder's Signature (Notarized)

CR01328025
License Number

6-18-10
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder whose name is ROGER WHIDDON
personally appeared before me and is known by me or has produced identification
(name of ID) on this 18th day of JUNE, 2010

Linda Kay Graham
Notary's Signature

LINDA KAY GRAHAM
Notary Public, State of Florida
My comm. exp. May 18, 2013
Comm. No. DD 874704

New Construction Subterranean Termite Service Record

OMB Approval No. 2502-0521
(exp. 02/29/2012)

This form is completed by the licensed Pest Control Company.

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information is required to obtain benefits. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

Section 24 CFR 200.926d(b)(3) requires that the sites for HUD insured structures must be free of termite hazards. This information collection requires the builder to certify that an authorized Pest Control company performed all required treatment for termites, and that the builder guarantees the treated area against infestation for one year. Builders, pest control companies, mortgage lenders, homebuyers, and HUD as a record of treatment for specific homes will use the information collected. The information is not considered confidential, therefore, no assurance of confidentiality is provided.

This report is submitted for informational purposes to the builder on proposed (new) construction cases when treatment for prevention of subterranean termite infestation is specified by the builder, architect, or required by the lender, architect, FHA, or VA.

All contracts for services are between the Pest Control Company and builder, unless stated otherwise.

28671

Section 1: General Information (Pest Control Company Information)

Company Name Aspen Pest Control, Inc.
Company Address P.O. Box 1795 City Lake City State FL Zip 32056
Company Business License No. JB109478 Company Phone No. 386-755-3611
FHA/VA Case No. (if any) _____

Section 2: Builder Information

Company Name Roger Whiddon Phone No. 754-7367

Section 3: Property Information

Location of Structure(s) Treated (Street Address or Legal Description, City, State and Zip) Terrance Ansbro 235 NW
Century 21, Ft. White, FL 32038

Section 4: Service Information

Date(s) of Service(s) 6-25-2010
Type of Construction (More than one box may be checked) ☐ Slab ☐ Basement ☐ Crawl ☐ Other _____

Check all that apply:

- ☐ A. Soil Applied Liquid Termiticide
Brand Name of Termiticide: 100-7lor EPA Registration No. 83423-4
Approx. Dilution (%): 6 Approx. Total Gallons Mix Applied: 200 Treatment completed on exterior: ☐ Yes ☐ No
- ☐ B. Wood Applied Liquid Termiticide
Brand Name of Termiticide: _____ EPA Registration No. _____
Approx. Dilution (%): _____ Approx. Total Gallons Mix Applied: _____
- ☐ C. Bait System Installed
Name of System _____ EPA Registration No. _____ Number of Stations Installed _____
- ☐ D. Physical Barrier System Installed
Name of System _____ Attach installation information (required) _____

Service Agreement Available? ☒ Yes ☐ No

Note: Some state laws require service agreements to be issued. This form does not preempt state law.

Attachments (List) _____

Comments _____

Name of Applicator(s) CHIT LOR Certification No. (if required by State law) JF104376

The applicator has used a product in accordance with the product label and state requirements. All materials and methods used comply with state and federal regulations.

Authorized Signature [Signature] Date 6-25-2010

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

Form NPCA-99-B may still be used

form HUD-NPMA-99-B

CERTIFICATE OF OCCUPANCY

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 07-6S-17-09621-411

Building permit No. 000028671

Use Classification SFD, UTILITY

Fire: 12.22

Permit Holder ROGER WHIDDON

Waste: 16.75

Owner of Building TERRANCE ANSBRO

Total: 28.97

Location: 235 SW BUTTERFLY COURT, FT. WHITE, FL

Date: 09/28/2010

Ray Cu



Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

Attn: Webbie

**Columbia County Building Department
Culvert Waiver**

**Culvert Waiver No.
000001829**

DATE: 06/18/2010 BUILDING PERMIT NO. 28671

APPLICANT LORI BOWMAN PHONE 754-7367

ADDRESS 582 NW BROOK LOOP LAKE CITY FL 32055

OWNER TERRANCE ANSBRO PHONE _____

ADDRESS 235 SW BUTTERFLY CT FT. WHITE FL 32038

CONTRACTOR ROGER WHIDDON PHONE 754-7367

LOCATION OF PROPERTY 41S, TR TUSTENUGGEE, ^{ED} ~~TR~~ JASMINE, TR BUTTERFLY COURT, TO THE
END ON RIGHT

SUBDIVISION/LOT/BLOCK/PHASE/UNIT _____

PARCEL ID # 07-6S-17-09621-411

I HEREBY CERTIFY THAT I UNDERSTAND AND WILL FULLY COMPLY WITH THE DECISION OF THE COLUMBIA COUNTY PUBLIC WORKS DEPARTMENT IN CONNECTION WITH THE HEREIN PROPOSED APPLICATION.

SIGNATURE: *Lori Bowman*

A SEPARATE CHECK IS REQUIRED
MAKE CHECKS PAYABLE TO BCC

Amount Paid 50.00

PUBLIC WORKS DEPARTMENT USE ONLY

I HEREBY CERTIFY THAT I HAVE EXAMINED THIS APPLICATION AND DETERMINED THAT THE CULVERT WAIVER IS:

APPROVED _____ NOT APPROVED - NEEDS A CULVERT PERMIT

COMMENTS: Jasmine + Butterfly Court are private Roads

SIGNED: *Jim. Murrell* DATE: 29 June 10

ANY QUESTIONS PLEASE CONTACT THE PUBLIC WORKS DEPARTMENT AT 386-752-5955.

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



#28671

Fax Message

Date: 8/4/2010

Time: 11:08:17 AM

To:

Company: Columbia County Building

Fax Number: 758-2160

From: Whiddon Construction

Subject: Truss Certification Letter _Ansbro

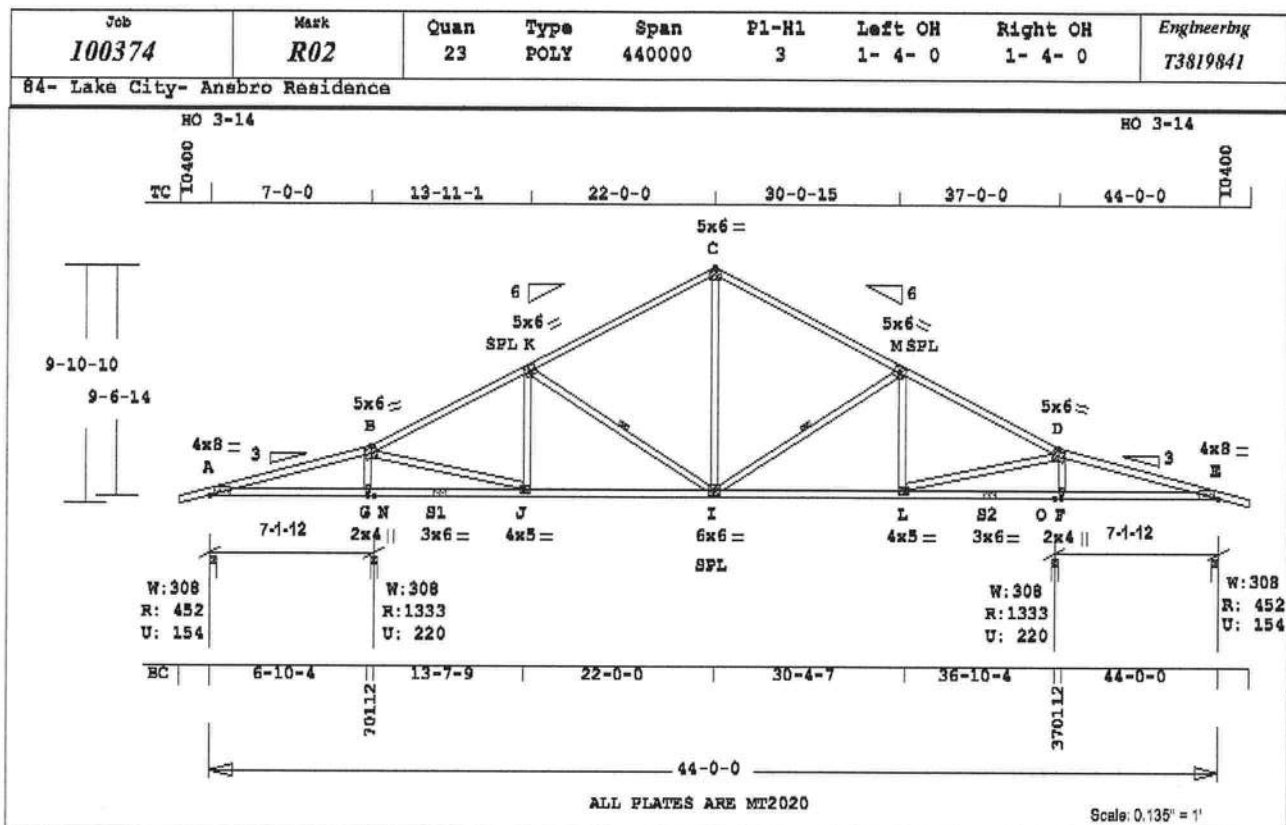
Total Number of Pages (including cover): 4

Memo: Here is the letter from the truss engineer for the Ansbro project. Please call if you have any questions.

Thank you,

Lori
Whiddon Construction
386-754-7367

If all pages were not received, please call back immediately:



Online Plus -- Version 27.0.003
 RUN DATE: 26-JUL-10

CSI -Size- ---Lumber---
 TC 0.61 2x 4 SP-#2
 BC 0.65 2x 4 SP-#2
 WB 0.36 2x 4 SP-#3

Brace truss as follows:
 O.C. From To
 TC Cont. 0- 0- 0 44- 0- 0
 BC Cont. 0- 0- 0 44- 0- 0
 One Continuous Lateral Brace
 K -I I -M
 Attach CLS with (2)-10d nails
 at each web.

psf-Ld Dead Live
 TC 7.0 20.0
 BC 10.0 0.0
 TC+BC 17.0 20.0
 Total 37.0 Spacing 24.0"
 Lumber Duration Factor 1.25
 Plate Duration Factor 1.25
 TC Fb=1.15 Fc=1.10 Fv=1.10
 BC Fb=1.10 Fc=1.10 Fv=1.10

Total Load Reactions (Lbs)
 Jt Down Uplift Horiz
 A 452 154 U 183 R
 N 1334 220 U
 O 1334 220 U
 E 452 154 U 183 R

Jt Nry Size Required
 A 3.5" 1.5"
 N 3.5" 1.5"
 O 3.5" 1.5"
 E 3.5" 1.5"

Plus 9 Wind Load Case(s)
 Plus 1 UBC LL Load Case(s)
 Plus 1 BC LL Load Case(s)
 Plus 1 DL Load Case(s)

Member CSI P lbs Axl-CST-Bnd
 -----Top Chords-----
 A -B 0.41 485 T 0.06 0.35
 B -K 0.61 1563 C 0.10 0.51
 K -C 0.60 1202 C 0.09 0.51
 C -M 0.60 1202 C 0.09 0.51
 M -D 0.61 1563 C 0.10 0.51
 D -E 0.41 470 T 0.06 0.35
 -----Bottom Chords-----
 A -G 0.40 448 T 0.07 0.33
 G -N 0.65 521 T 0.08 0.57
 N -S1 0.65 521 T 0.08 0.57
 S1 -J 0.25 521 T 0.04 0.21
 J -I 0.58 1401 T 0.23 0.35

MITAK ONLINE PLUS APPROX. TRUSS WEIGHT: 281.7 LBS

I -L	0.58	1401	T	0.23	0.35
L -S2	0.25	521	T	0.04	0.21
S2 -O	0.65	521	T	0.08	0.57
O -F	0.65	521	T	0.08	0.57
F -E	0.40	448	T	0.07	0.33
-----Web-----					
G -B	0.19	1155	C		
B -J	0.29	904	T		
J -K	0.04	192	T		
K -I	0.17	387	C	1	Br
I -C	0.35	632	T		
I -M	0.17	387	C	1	Br
L -M	0.04	189	T		
L -D	0.29	904	T		
F -D	0.19	1155	C		

TL Defl -0.20" in F -E L/395
 LL Defl -0.10" in F -E L/782
 Shear // Grain in G -N 1.00

Plates for each ply each face.
 Plate - MT20 20 Ga, Gross Area
 Plate - MT2H 20 Ga, Gross Area
 Jt Type Plt Size X Y JST
 A MT20 4.0x 8.0 Ctr Ctr 0.1 0.40
 B MT20 5.0x 6.0 Ctr Ctr 0.46
 K MT20 5.0x 6.0-0.2 0.5 0.43
 C MT20 5.0x 6.0 Ctr Ctr 0.1 0.33
 M MT20 5.0x 6.0 0.2 0.5 0.43
 D MT20 5.0x 6.0 Ctr Ctr 0.46
 E MT20 4.0x 8.0 Ctr Ctr 0.1 0.40
 G MT20 2.0x 4.0 Ctr Ctr 0.41
 S1 MT20 3.0x 6.0 Ctr Ctr 0.51
 J MT20 4.0x 5.0-0.8 Ctr Ctr 0.69
 I MT20 6.0x 6.0 Ctr Ctr 0.48
 L MT20 4.0x 5.0 0.8 Ctr Ctr 0.69
 S2 MT20 3.0x 6.0 Ctr Ctr 0.51
 F MT20 2.0x 4.0 Ctr Ctr 0.41

REVIEWED BY:
 MITAK Industries, Inc.
 6904 Parks East Blvd.
 Tampa, FL 33610

REFER TO ONLINE PLUS GENERAL
 NOTES AND SYMBOLS SHEET FOR
 ADDITIONAL SPECIFICATIONS.

NOTES:
 Trusses Manufactured by:
 RIDGWAY ROOF TRUSS
 Analysis Conforms To:
 FBC2007
 TPI 2002
 OK Loading
 Soffit psf 2.0
 This truss has been designed
 for 20.0 psf LL on the B.C.
 in areas where a rectangle

3- 6- 0 tall by
 2- 0- 0 wide
 will fit between the B.C.
 and any other member.
 Design checked for 10 psf non-
 concurrent LL on BC.
 Wind Loads - ANSI / ASCE 7-05
 Truss is designed as
 Components and Claddings*
 for Exterior zone location.
 Wind Speed: 110 mph
 Mean Roof Height: 17'-0"
 Exposure Category: B
 Occupancy Factor: 1.00
 Building Type: Enclosed
 TC Dead Load: 4.0 psf
 BC Dead Load: 6.0 psf
 User-defined wind-exposed BC
 regions --From-- --To--
 0- 0- 0 6-10- 4
 37- 1-12 44- 0- 0
 Max comp. force 1563 lbs
 Max tens. force 1401 lbs
 Connector Plate Fabrication
 Tolerance = 20s
 This truss is designed for a
 creep factor of 1.5 which
 is used to calculate total
 load deflection.



FL Cert. 6634

July 26, 2010



RE: 100374 - ROOF DESIGN INFO

MiTek Industries, Inc.

8904 Parke East Blvd.
Tampa, FL 33610-4115

Site Information:

Customer Info: 84 Lumber - Lake City, FL Model: Ansbro Residence
Lot/Block: - Subdivision: -
Address: -
City: Lake city State: FL

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

Name: License #:
Address: State:
City:

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

Design Code: FBC2007 Design Program: OnLine Plus 27.0.003
Wind Code: ASCE 7-05 Wind Speed: 110 mph
Roof Load: 37.0 psf

This package includes 1 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	T3819841	R02	7/28/010

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

Truss Design Engineer's Name: O'Regan, Philip
My license renewal date for the state of Florida is February 28, 2011.

NOTE: The seal on these drawings indicate acceptance of professional engineering responsibility solely for the truss components shown. The suitability and use of this component for any particular building is the responsibility of the building designer, per ANSI/TPI-1 Sec. 2.



FL Cert. 6634

July 26, 2010

O'Regan, Philip

1 of 1

ONLINE PLUS GENERAL NOTES & SYMBOLS

108

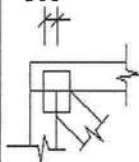
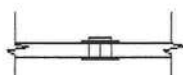


PLATE LOCATION

Center plates on joints unless otherwise noted in plate list or on drawing. Dimensions are given in inches (i.e. 1 1/2" or 1.5") or IN-16ths (i.e. 108)

FLOOR TRUSS SPLICE (3X2, 4X2, 6X2)



(W) = Wide Face Plate
(N) = Narrow Face Plate

LATERAL BRACING

Designates the location for continuous lateral bracing (CLB) for support of individual truss members only. CLBs must be properly anchored or restrained to prevent simultaneous buckling of adjacent truss members.

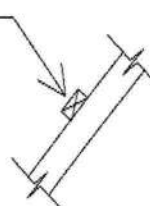
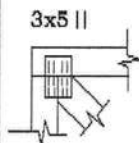


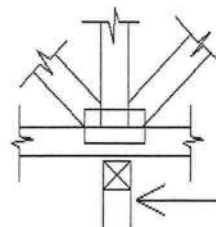
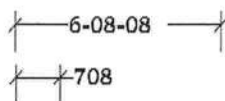
PLATE SIZE AND ORIENTATION



The first dimension is the width measured perpendicular to slots. The second dimension is the length measured parallel to slots. Plate orientation, shown next to plate size, indicates direction of slots in connector plates.

DIMENSIONS

All dimensions are shown in FT-IN-SX (i.e. 6'-8.5" or 6-08-08). Dimensions less than one foot are shown in IN-SX only (i.e. 708).



BEARING

When truss is designed to bear on multiple supports, interior bearing locations should be marked on the truss. Interior support or temporary shoring must be in place before trusses are installed. If necessary, shim bearings to assure solid contact with truss.

W - Actual Bearing Width (IN-SX)
R - Reaction (lbs.)
U - Uplift (lbs.)

Metal connector plates shall be applied on both faces of truss at each joint. Center the plates, unless indicated otherwise. No loose knots or wane in plate contact area. Splice only where shown. Overall spans assume 4" bearing at each end, unless indicated otherwise. Cutting and fabrication shall be performed using equipment which produces snug-fitting joints and plates. Unless otherwise noted, moisture content of lumber shall not exceed 19% at time of fabrication and the attached truss designs are not applicable for use with fire retardant lumber and some preservative treatments. Nails specified on Truss Design Drawings refer to common wire nails, except as noted. The attached design drawings were prepared in accordance with "National Design Specifications for Wood Construction" (AF & PA), "National Design Standard for Metal Plate Connected Wood Truss Construction" (ANSI/TPI 1), and HUD Design Criteria for Trussed Rafters.

Mitek Industries Inc. bears no responsibility for the erection of trusses, field bracing or permanent truss bracing. Refer to "Building Component Safety Information" (BCSI 1) as published by Truss Plate Institute, 218 North Lee Street, Suite 312, Alexandria, Virginia 22314. Persons erecting trusses are cautioned to seek professional advice concerning proper erection bracing to prevent toppling and "dominoing". Care should be taken to prevent damage during fabrication, storage, shipping and erection. Top and bottom chords shall be adequately braced in the absence of sheathing or rigid ceiling, respectively. It is the responsibility of others to ascertain that design loads utilized on these drawings meet or exceed the actual dead loads imposed by the structure and the live loads imposed by the local building code or historical climatic records. When truss hangers are specified on the Truss Design Drawing, they must be installed per manufacturer's details and specifications.

FURNISH A COPY OF THE ATTACHED TRUSS DESIGN DRAWINGS TO ERECTION CONTRACTOR. IT IS THE RESPONSIBILITY OF THE BUILDING DESIGNER TO REVIEW THESE DRAWINGS AND VERIFY THAT DATA, INCLUDING DIMENSIONS & LOADS, CONFORM TO ARCHITECTURAL PLAN / SPECS AND THE TRUSS PLACEMENT DIAGRAM FURNISHED BY THE TRUSS MANUFACTURER.



Mitek Industries, Inc.

6904 Parke East Blvd.
Tampa, FL 33610-4115

Tel: 813-972-1135
Fax: 813-971-6117

PRODUCT APPROVAL SPECIFICATION

Location: _____

SHEET _____

Project Name: *Ansbro*

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and the product approval number(s) on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit on or after April 1, 2004. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. More information about statewide product approval can be obtained at www.floridabuilding.org

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
A. EXTERIOR DOORS			
1. Swinging	<i>Masonite</i>	<i>Steel Edge Side-hinged Door</i>	<i>FL 940.1</i>
2. Sliding			
3. Sectional			
4. Roll up			
5. Automatic			
6. Other			
B. WINDOWS			
1. Single hung			
2. Horizontal Slider			
3. Casement			
4. Double Hung	<i>Anderson</i>	<i>400 Series Tiltwash DH Window</i>	<i>FL 1591.3</i>
5. Fixed			
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11. Dual Action			
12. Other			
C. PANEL WALL			
1. Siding	<i>James Hardie</i>	<i>Artisan Lap Siding Fiber Cement</i>	<i>FL 10477.1</i>
2. Soffits	<i>James Hardie</i>	<i>Hardie Soffit Panels</i>	<i>FL 13265.1</i>
3. EIFS			
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block			
8. Membrane			
9. Greenhouse			
10. Other			
D. ROOFING PRODUCTS			
1. Asphalt Shingles			
2. Underlayments			
3. Roofing Fasteners			
4. Non-structural Metal	<i>Union Corrugating</i>	<i>29 ga. Standing Seam Metal Roof</i>	<i>FL 4586.2</i>
5. Built-Up Roofing			
6. Modified Bitumen			
7. Single Ply Roofing Sys			
8. Roofing Tiles			
9. Roofing Insulation			
10. Waterproofing			
11. Wood shingles /shakes			
12. Roofing Slate			

Residential System Sizing Calculation

Summary

Terry Ansbro

Project Title:
Ansbro Residence

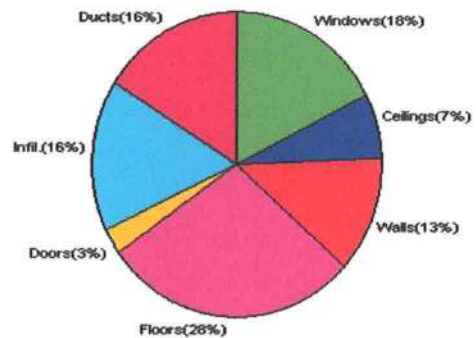
6/4/2010

Location for weather data: Gainesville, FL - Defaults: Latitude(29.7) Altitude(152 ft.) Temp Range(M)			
Humidity data: Interior RH (50%) Outdoor wet bulb (77F) Humidity difference(54gr.)			
Winter design temperature(MJ8 99%)	33 F	Summer design temperature(MJ8 99%)	92 F
Winter setpoint	70 F	Summer setpoint	75 F
Winter temperature difference	37 F	Summer temperature difference	17 F
Total heating load calculation	23656 Btuh	Total cooling load calculation	19183 Btuh
Submitted heating capacity	% of calc Btuh	Submitted cooling capacity	% of calc Btuh
Total (Electric Heat Pump)	148.0 35000	Sensible (SHR = 0.75)	173.9 26250
Heat Pump + Auxiliary(0.0kW)	148.0 35000	Latent	213.8 8750
		Total (Electric Heat Pump)	182.5 35000

WINTER CALCULATIONS

Winter Heating Load (for 1390 sqft)

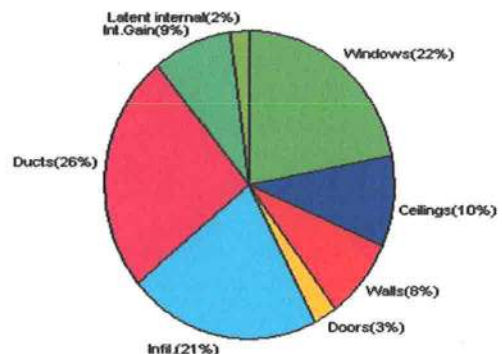
Load component		Load	
Window total	143 sqft	4150	Btuh
Wall total	1038 sqft	2969	Btuh
Door total	40 sqft	681	Btuh
Ceiling total	1390 sqft	1638	Btuh
Floor total	1390 sqft	6666	Btuh
Infiltration	93 cfm	3754	Btuh
Duct loss		3800	Btuh
Subtotal		23656	Btuh
Ventilation	0 cfm	0	Btuh
TOTAL HEAT LOSS		23656	Btuh



SUMMER CALCULATIONS

Summer Cooling Load (for 1390 sqft)

Load component		Load	
Window total	143 sqft	4207	Btuh
Wall total	1038 sqft	1557	Btuh
Door total	40 sqft	515	Btuh
Ceiling total	1390 sqft	1859	Btuh
Floor total		0	Btuh
Infiltration	74 cfm	1380	Btuh
Internal gain		1660	Btuh
Duct gain		3914	Btuh
Sens. Ventilation	0 cfm	0	Btuh
Blower Load		0	Btuh
Total sensible gain		15091	Btuh
Latent gain(ducts)		983	Btuh
Latent gain(infiltration)		2709	Btuh
Latent gain(ventilation)		0	Btuh
Latent gain(internal/occupants/other)		400	Btuh
Total latent gain		4092	Btuh
TOTAL HEAT GAIN		19183	Btuh



8th Edition

EnergyGauge® System Sizing

PREPARED BY: _____

DATE: _____

System Sizing Calculations - Winter

Residential Load - Whole House Component Details

Terry Ansbro

Project Title:
Ansbro Residence
Building Type: User

6/4/2010

Reference City: Gainesville, FL (Defaults) Winter Temperature Difference: 37.0 F (MJ8 99%)

Component Loads for Whole House							
Window	Panes/Type	Frame	U	Orientation	Area(sqft)	X	HTM=
1	2, NFRC 0.60	Vinyl	0.55	N	9.0		20.4
2	2, NFRC 0.70	Vinyl	0.80	N	20.0		29.6
3	2, NFRC 0.70	Vinyl	0.80	E	3.0		29.6
4	3, NFRC 0.70	Vinyl	0.80	E	15.0		29.6
5	2, NFRC 0.70	Vinyl	0.80	S	75.0		29.6
6	2, NFRC 0.70	Vinyl	0.80	W	15.0		29.6
7	2, NFRC 0.70	Vinyl	0.80	W	6.0		29.6
	Window Total				143.0(sqft)		
							4150 Btuh
Walls	Type	Ormt.	Ueff.	R-Value (Cav/Sh)	Area	X	HTM=
1	Frame - Wood	- Ext	(0.077)	19.0/0.0	342		2.86
2	Frame - Wood	- Ext	(0.077)	19.0/0.0	222		2.86
3	Frame - Wood	- Ext	(0.077)	19.0/0.0	256		2.86
4	Frame - Wood	- Ext	(0.077)	19.0/0.0	219		2.86
	Wall Total				1038(sqft)		
							2969 Btuh
Doors	Type	Storm	Ueff.		Area	X	HTM=
1	Wood - Exterior,	n	(0.460)		20		17.0
2	Wood - Exterior,	n	(0.460)		20		17.0
	Door Total				40(sqft)		
							681Btuh
Ceilings	Type/Color/Surface		Ueff.	R-Value	Area	X	HTM=
1	Vented Attic/L/Shing		(0.032)	30.0/0.0	1390		1.2
	Ceiling Total				1390(sqft)		
							1638 Btuh
Floors	Type		Ueff.	R-Value	Size	X	HTM=
1	Slab On Grade		(1.180)	0.0	152.7 ft(perim.)		43.7
	Floor Total				1390 sqft		
							6666 Btuh
							6666 Btuh
							Envelope Subtotal:
							16103 Btuh
Infiltration	Type		ACH	Volume(cuft)	Wall Ratio	CFM=	
	Natural		0.50	11120	1.00	92.7	
							3754 Btuh
Duct load	Average sealed, R6.0, Supply(Att), Return(Att)				(DLM of 0.191)		
							3800 Btuh
All Zones							
							Sensible Subtotal All Zones
							23656 Btuh

Manual J Winter Calculations

Residential Load - Component Details (continued)

Terry Ansbro

Project Title:
Ansbro Residence
Building Type: User

6/4/2010

WHOLE HOUSE TOTALS

Totals for Heating	Subtotal Sensible Heat Loss	23656 Btuh
	Ventilation Sensible Heat Loss	0 Btuh
	Total Heat Loss	23656 Btuh

EQUIPMENT

1. Electric Heat Pump	#	35000 Btuh
-----------------------	---	------------

Key: Window types - NFRC (Requires U-Factor and Shading coefficient(SHGC) of glass as numerical values)
or - Glass as 'Clear' or 'Tint' (Uses U-Factor and SHGC defaults)
U - (Window U-Factor)
HTM - (ManualJ Heat Transfer Multiplier)



Version 8

System Sizing Calculations - Summer

Residential Load - Whole House Component Details

Terry Ansbro

Project Title:
Ansbro Residence

6/4/2010

Reference City: Gainesville, FL

Temperature Difference: 17.0F(MJ8 99%)

Humidity difference: 54gr.

Component Loads for Whole House

Window	Type*						Overhang		Window Area(sqft)			HTM		Load	
	Panes	SHGC	U	InSh	IS	Omt	Len	Hgt	Gross	Shaded	Unshaded	Shaded	Unshaded		
1	2 NFRC	0.60, 0.55	H06	No	N		10.0ft	4.0ft.	9.0	0.0	9.0	15	15	132 Btuh	
2	2 NFRC	0.70, 0.80	H06	No	N		10.0ft	4.0ft.	20.0	0.0	20.0	20	20	397 Btuh	
3	2 NFRC	0.70, 0.80	H06	No	E		2.0ft.	8.0ft.	3.0	0.0	3.0	20	53	160 Btuh	
4	3 NFRC	0.70, 0.80	H06	No	E		2.0ft.	8.0ft.	15.0	0.0	15.0	20	53	801 Btuh	
5	2 NFRC	0.70, 0.80	H06	No	S		10.0ft	4.0ft.	75.0	75.0	0.0	20	24	1487 Btuh	
6	2 NFRC	0.70, 0.80	H06	No	W		2.0ft.	8.0ft.	15.0	0.0	15.0	20	53	801 Btuh	
7	2 NFRC	0.70, 0.80	H06	No	W		8.0ft.	8.0ft.	6.0	0.0	6.0	20	53	320 Btuh	
	Excursion													109 Btuh	
	Window Total								143 (sqft)					4207 Btuh	
Walls	Type						U-Value		R-Value		Area(sqft)		HTM		Load
									Cav/Sheath						
1	Frame - Wood - Ext						0.08		19.0/0.0		341.7		1.5		512 Btuh
2	Frame - Wood - Ext						0.08		19.0/0.0		222.0		1.5		333 Btuh
3	Frame - Wood - Ext						0.08		19.0/0.0		255.7		1.5		383 Btuh
4	Frame - Wood - Ext						0.08		19.0/0.0		219.0		1.5		328 Btuh
	Wall Total								1038 (sqft)					1557 Btuh	
Doors	Type										Area (sqft)		HTM		Load
1	Wood - Exterior										20.0		12.9		258 Btuh
2	Wood - Exterior										20.0		12.9		258 Btuh
	Door Total								40 (sqft)					515 Btuh	
Ceilings	Type/Color/Surface						U-Value		R-Value		Area(sqft)		HTM		Load
1	Vented Attic/Light/Shingle						0.032		30.0/0.0		1390.0		1.34		1859 Btuh
	Ceiling Total								1390 (sqft)					1859 Btuh	
Floors	Type								R-Value		Size		HTM		Load
1	Slab On Grade								0.0		1390 (ft-perimeter)		0.0		0 Btuh
	Floor Total								1390.0 (sqft)					0 Btuh	
	Envelope Subtotal:													8138 Btuh	
Infiltration	Type						ACH		Volume(cuft)		Wall Ratio		CFM=		Load
	SensibleNatural						0.40		11120		1038		92.7		
															1380 Btuh
Internal gain							Occupants		Btuh/occupant		Appliance		Load		
							3		X 230		+ 1200		1890 Btuh		
	Sensible Envelope Load:													11407 Btuh	
Duct load	Average sealed, Supply(R6.0-Attic), Return(R6.0-Attic)										(DGM of 0.350)			3914 Btuh	
	Sensible Load All Zones													15321 Btuh	

Manual J Summer Calculations

Residential Load - Component Details (continued)

Terry Ansbro

Project Title: Climate:FL_GAINESVILLE_REGIONAL_A
Ansbro Residence

6/4/2010

WHOLE HOUSE TOTALS

Whole House Totals for Cooling	Sensible Envelope Load All Zones	11177 Btuh
	Sensible Duct Load	3914 Btuh
	Total Sensible Zone Loads	15091 Btuh
	Sensible ventilation	0 Btuh
	Blower	0 Btuh
	Total sensible gain	15091 Btuh
	Latent infiltration gain (for 54 gr. humidity difference)	2709 Btuh
	Latent ventilation gain	0 Btuh
	Latent duct gain	983 Btuh
	Latent occupant gain (2 people @ 200 Btuh per person)	400 Btuh
	Latent other gain	0 Btuh
	Latent total gain	4092 Btuh
	TOTAL GAIN	19183 Btuh

EQUIPMENT

1. Central Unit	#	35000 Btuh
-----------------	---	------------

*Key: Window types (Panels - Number and type of panes of glass)
(SHGC - Shading coefficient of glass as SHGC numerical value)
(U - Window U-Factor)
(InSh - Interior shading device: none(No), Blinds(B), Draperies(D) or Roller Shades(R))
- For Blinds: Assume medium color, half closed
For Draperies: Assume medium weave, half closed
For Roller shades: Assume translucent, half closed
(IS - Insect screen: none(N), Full(F) or Half(½))
(Ornt - compass orientation)



Version 8

Manual J Winter Calculations

Residential Load - Component Details (continued)

Terry Ansbro

Project Title:
Ansbro Residence
Building Type: User

6/4/2010

WHOLE HOUSE TOTALS

Totals for Heating	Subtotal Sensible Heat Loss	23656 Btuh
	Ventilation Sensible Heat Loss	0 Btuh
	Total Heat Loss	23656 Btuh

EQUIPMENT

1. Electric Heat Pump	#	35000 Btuh
-----------------------	---	------------

Key: Window types - NFRC (Requires U-Factor and Shading coefficient(SHGC) of glass as numerical values)
or - Glass as 'Clear' or 'Tint' (Uses U-Factor and SHGC defaults)
U - (Window U-Factor)
HTM - (ManualJ Heat Transfer Multiplier)



Version 8

System Sizing Calculations - Winter

Residential Load - Room by Room Component Details

Terry Ansbro

Project Title:
Ansbro Residence
Building Type: User

6/4/2010

Reference City: Gainesville, FL (Defaults) Winter Temperature Difference: 37.0 F (MJ8 99%)

Component Loads for Room/Zone #1: Main								
Window	Panes/Type	Frame	U	Orientation	Area(sqft)	X	HTM=	Load
1	2, NFRC 0.60	Vinyl	0.55	N	9.0		20.4	183 Btuh
2	2, NFRC 0.70	Vinyl	0.80	N	20.0		29.6	592 Btuh
3	2, NFRC 0.70	Vinyl	0.80	E	3.0		29.6	89 Btuh
4	3, NFRC 0.70	Vinyl	0.80	E	15.0		29.6	444 Btuh
5	2, NFRC 0.70	Vinyl	0.80	S	75.0		29.6	2220 Btuh
6	2, NFRC 0.70	Vinyl	0.80	W	15.0		29.6	444 Btuh
7	2, NFRC 0.70	Vinyl	0.80	W	6.0		29.6	178 Btuh
Window Total					143.0(sqft)			4150 Btuh
Walls	Type	Ornt.	Ueff.	R-Value (Cav/Sh)	Area	X	HTM=	Load
1	Frame - Wood	- Ext	(0.077)	19.0/0.0	342		2.86	977 Btuh
2	Frame - Wood	- Ext	(0.077)	19.0/0.0	222		2.86	635 Btuh
3	Frame - Wood	- Ext	(0.077)	19.0/0.0	256		2.86	731 Btuh
4	Frame - Wood	- Ext	(0.077)	19.0/0.0	219		2.86	626 Btuh
Wall Total					1038(sqft)			2969 Btuh
Doors	Type	Storm	Ueff.		Area	X	HTM=	Load
1	Wood - Exterior,	n	(0.460)		20		17.0	340 Btuh
2	Wood - Exterior,	n	(0.460)		20		17.0	340 Btuh
Door Total					40(sqft)			681Btuh
Ceilings	Type/Color/Surface		Ueff.	R-Value	Area	X	HTM=	Load
1	Vented Attic/L/Shing		(0.032)	30.0/0.0	1390		1.2	1638 Btuh
Ceiling Total					1390(sqft)			1638Btuh
Floors	Type		Ueff.	R-Value	Size	X	HTM=	Load
1	Slab On Grade		(1.180)	0.0	152.7 ft(perim.)		43.7	6666 Btuh
Floor Total					1390 sqft			6666 Btuh
Zone Envelope Subtotal:								16103 Btuh
Infiltration	Type		ACH	Zone Volume	Wall Ratio		CFM=	
	Natural		0.50	11120	1.00		92.7	3754 Btuh
Duct load	Average sealed, Supply(R6.0-Attic), Return(R6.0-Attic)					(DLM of 0.191)		3800 Btuh
Zone #1	Sensible Zone Subtotal							23656 Btuh

Manual J Summer Calculations

Residential Load - Component Details (continued)

Terry Ansbro

Project Title: Climate:FL_GAINESVILLE_REGIONAL_A
Ansbro Residence

6/4/2010

WHOLE HOUSE TOTALS

Whole House Totals for Cooling	Sensible Envelope Load All Zones	11177 Btuh
	Sensible Duct Load	3914 Btuh
	Total Sensible Zone Loads	15091 Btuh
	Sensible ventilation	0 Btuh
	Blower	0 Btuh
	Total sensible gain	15091 Btuh
	Latent infiltration gain (for 54 gr. humidity difference)	2709 Btuh
	Latent ventilation gain	0 Btuh
	Latent duct gain	983 Btuh
	Latent occupant gain (2 people @ 200 Btuh per person)	400 Btuh
	Latent other gain	0 Btuh
	Latent total gain	4092 Btuh
	TOTAL GAIN	19183 Btuh

EQUIPMENT

1. Central Unit	#	35000 Btuh
-----------------	---	------------

*Key: Window types (Panels - Number and type of panes of glass)
(SHGC - Shading coefficient of glass as SHGC numerical value)
(U - Window U-Factor)
(InSh - Interior shading device: none(No), Blinds(B), Draperies(D) or Roller Shades(R))
- For Blinds: Assume medium color, half closed
For Draperies: Assume medium weave, half closed
For Roller shades: Assume translucent, half closed
(IS - Insect screen: none(N), Full(F) or Half(½))
(Ornt - compass orientation)



Version 8

System Sizing Calculations - Summer

Residential Load - Room by Room Component Details

Terry Ansbro

Project Title:
Ansbro Residence

6/4/2010

Reference City: Gainesville, FL

Temperature Difference: 17.0F(MJ8 99%)

Humidity difference: 54gr.

Component Loads for Room/Zone #1: Main

Window	Type*						Overhang		Window Area(sqft)			HTM		Load	
	Panes	SHGC	U	InSh	IS	Ornt	Len	Hgt	Gross	Shaded	Unshaded	Shaded	Unshaded		
1	2 NFRC	0.60, 0.55	H06	No	N		10.0f	4.0ft.	9.0	0.0	9.0	15	15	132 Btuh	
2	2 NFRC	0.70, 0.80	H06	No	N		10.0f	4.0ft.	20.0	0.0	20.0	20	20	397 Btuh	
3	2 NFRC	0.70, 0.80	H06	No	E		2.0ft.	8.0ft.	3.0	0.0	3.0	20	53	160 Btuh	
4	3 NFRC	0.70, 0.80	H06	No	E		2.0ft.	8.0ft.	15.0	0.0	15.0	20	53	801 Btuh	
5	2 NFRC	0.70, 0.80	H06	No	S		10.0f	4.0ft.	75.0	75.0	0.0	20	24	1487 Btuh	
6	2 NFRC	0.70, 0.80	H06	No	W		2.0ft.	8.0ft.	15.0	0.0	15.0	20	53	801 Btuh	
7	2 NFRC	0.70, 0.80	H06	No	W		8.0ft.	8.0ft.	6.0	0.0	6.0	20	53	320 Btuh	
Window Total									143 (sqft)					4098 Btuh	
Walls	Type						U-Value		R-Value		Area(sqft)		HTM		Load
									Cav/Sheath						
1	Frame - Wood - Ext						0.08		19.0/0.0		341.7		1.5		512 Btuh
2	Frame - Wood - Ext						0.08		19.0/0.0		222.0		1.5		333 Btuh
3	Frame - Wood - Ext						0.08		19.0/0.0		255.7		1.5		383 Btuh
4	Frame - Wood - Ext						0.08		19.0/0.0		219.0		1.5		328 Btuh
Wall Total												1038 (sqft)		1557 Btuh	
Doors	Type										Area (sqft)		HTM		Load
1	Wood - Exterior										20.0		12.9		258 Btuh
2	Wood - Exterior										20.0		12.9		258 Btuh
Door Total												40 (sqft)		515 Btuh	
Ceilings	Type/Color/Surface						U-Value		R-Value		Area(sqft)		HTM		Load
1	Vented Attic/Light/Shingle						0.032		30.0/0.0		1390.0		1.34		1859 Btuh
Ceiling Total												1390 (sqft)		1859 Btuh	
Floors	Type								R-Value		Size		HTM		Load
1	Slab On Grade								0.0		1390 (ft-perimeter)		0.0		0 Btuh
Floor Total												1390.0 (sqft)		0 Btuh	
Zone Envelope Subtotal:															8029 Btuh
Infiltration	Type						ACH		Volume(cuft)		Wall Ratio		CFM=		Load
	SensibleNatural						0.40		11120		1.00		74.1		
Internal gain							Occupants		Btuh/occupant		Appliance		Load		
							2		X 230		+		1200		
Sensible Envelope Load:															11068 Btuh
Duct load	Average sealed, Supply(R6.0-Attic), Return(R6.0-Attic)											(DGM of 0.350)		3876 Btuh	
Sensible Zone Load															14944 Btuh

Manual J Summer Calculations

Residential Load - Component Details (continued)

Terry Ansbro

Project Title: Climate:FL_GAINESVILLE_REGIONAL_A
Ansbro Residence

6/4/2010

The following window Excursion will be assigned to the system loads.

Windows	July excursion for System 1	Excursion Subtotal:	109 Btuh 109 Btuh
Duct load			38 Btuh
		Sensible Excursion Load	147 Btuh

Manual J Summer Calculations

Residential Load - Component Details (continued)

Terry Ansbro

Project Title: Climate:FL_GAINESVILLE_REGIONAL_A
Ansbro Residence

6/4/2010

WHOLE HOUSE TOTALS

Whole House Totals for Cooling	Sensible Envelope Load All Zones	11177 Btuh
	Sensible Duct Load	3914 Btuh
	Total Sensible Zone Loads	15091 Btuh
	Sensible ventilation	0 Btuh
	Blower	0 Btuh
	Total sensible gain	15091 Btuh
	Latent infiltration gain (for 54 gr. humidity difference)	2709 Btuh
	Latent ventilation gain	0 Btuh
	Latent duct gain	983 Btuh
	Latent occupant gain (2 people @ 200 Btuh per person)	400 Btuh
	Latent other gain	0 Btuh
	Latent total gain	4092 Btuh
	TOTAL GAIN	19183 Btuh

EQUIPMENT

1. Central Unit	#	35000 Btuh
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*Key: Window types (Panels - Number and type of panes of glass)
(SHGC - Shading coefficient of glass as SHGC numerical value)
(U - Window U-Factor)
(InSh - Interior shading device: none(No), Blinds(B), Draperies(D) or Roller Shades(R))
- For Blinds: Assume medium color, half closed
For Draperies: Assume medium weave, half closed
For Roller shades: Assume translucent, half closed
(IS - Insect screen: none(N), Full(F) or Half(½))
(Ornt - compass orientation)



Version 8