

DATE 06/03/2009

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000027850

APPLICANT DIANE SHEPHERD PHONE 386.755.1554

ADDRESS 1223 SW NEWTON CIRCLE FT. WHITE FL 32038

OWNER DIANE SHEPHERD PHONE 386.755.1554

ADDRESS 1223 SW NEWTON CIRCLE FT. WHITE FL 32038

CONTRACTOR DIANE SHEPHERD PHONE 386.755.1554

LOCATION OF PROPERTY 441-S TO C-131-S,TR TO NEWTON CIRCLE,TL TO 2ND R ON NEWTON
CR, 2ND PROPERTY ON R AFTER TREE CT.

TYPE DEVELOPMENT SFD/UTILITY ESTIMATED COST OF CONSTRUCTION 81450.00

HEATED FLOOR AREA 1107.00 TOTAL AREA 1629.00 HEIGHT 33.60 STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 8'12 FLOOR CONC

LAND USE & ZONING A-3 MAX. HEIGHT 35

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

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

PARCEL ID 08-6S-17-09626-116 SUBDIVISION TUSTENUGGEE HILLS

LOT 16 BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 4.88

OWNER *Diane Shepherd*

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

EXISTING 09-0315-E BLK HD Y _____

Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: SECTION 2.3.1. LEGAL LOT OF RECORD. 1 FOOT ABOVE ROAD. REF:

RV - STUP 0905-21 PERMIT# 27851

Check # or Cash 2560

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 \$ 410.00 CERTIFICATION FEE \$ 8.14 SURCHARGE FEE \$ 8.14

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 501.28

INSPECTORS OFFICE *[Signature]* CLERKS OFFICE *CA*

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.

STUP 0905-21

CK 2560

Columbia County Building Permit Application

27851

For Office Use Only Application # 0905-39 Date Received 5/21/09 By G Permit # ~~1458~~
Zoning Official BLK Date 28-05-09 Flood Zone X Land Use A-3 Zoning A-3
FEMA Map # N/A Elevation N/A MFE 1st above rd River N/A Plans Examiner HD Date 5-22-09
Comments Section 2.3.1 Legal Lot of Record RV on property STUP 0905-21
☒ NOC ☒ 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 Suspended

Septic Permit No. dropped off by Linda Rucker Fax 386-754-0961
Name Authorized Person Signing Permit Diane Shepherd Phone 386-755-1554
Address 1223 SW Newton Circle Ft White, FL 32038
Owners Name Diane Shepherd Phone 386-755-1554
911 Address 1223 SW Newton Circle Ft White, FL 32038
Contractors Name owner/builder Diane Shepherd Phone 386-755-1554
Address 1223 SW Newton Circle Ft White, FL 32038
Fee Simple Owner Name & Address NA
Bonding Co. Name & Address NA
Architect/Engineer Name & Address Design Group Architecture / Mark Disosway
Mortgage Lenders Name & Address NA

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

Property ID Number 08-65-17-09626-116 Estimated Cost of Construction 50,000

Subdivision Name Tustenuggee Hills Lot 16 Block Unit Phase

Driving Directions CR 131 S, L on Newton Circle, 2nd Rt,

(Newton Circle) 2nd property on R after Tree Ct.

Number of Existing Dwellings on Property 1 RV

Construction of Single family dwelling Total Acreage 4.88 Lot Size 4.88

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 33'-6"

Actual Distance of Structure from Property Lines - Front 300' Side 256' Side 170' Rear 100'

Number of Stories 1 Heated Floor Area 1107 Total Floor Area 1629 Roof Pitch 8-12

Spoke to Melvinie Skaggs

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

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.

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.

OWNERS AFFIDAVIT: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws and regulating construction and zoning. I further understand the above written responsibilities in Columbia County for obtaining this Building Permit.

Diane Shepherd
Owners Signature

Affirmed under penalty of perjury to by the Owner and subscribed before me this 15 day of May 2009
Personally known _____ or Produced Identification _____

SEAL:

NOTARY PUBLIC-STATE OF FLORIDA
Linda R. Roder
Commission #DD755608
Expires: MAR. 24, 2012
BONDED THRU ATLANTIC BONDING CO., INC.

Linda Roder
State of Florida Notary Signature (For the Owner)

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.

NA
Contractor's Signature (Permitee)

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

Affirmed under penalty of perjury to by the Contractor and subscribed before me this _____ day of _____ 20____.
Personally known _____ or Produced Identification _____

SEAL:

State of Florida Notary Signature



COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

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

NOTARIZED DISCLOSURE STATEMENT

FOR OWNER/BUILDER WHEN ACTING AS THEIR OWN CONTRACTOR AND CLAIMING EXEMPTION OF CONTRACTOR LICENSING REQUIREMENTS IN ACCORDANCE WITH FLORIDA STATUTES, ss. 489.103(7).

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$75,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved for yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. You may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

I understand that if I am not physically doing the work or physically supervising free labor from friends or relatives, that I must hire licensed contractors, i.e. electrician, plumber, mechanical (heating & air conditioning), etc. I further understand that the violation of not physically doing the work, and the use of unlicensed contractors at the construction site, will cause the project to be shut down by the inspection staff of the Columbia County Building Department. Additionally, state statutes allows for additional penalties. I also understand that if this violation does occur, that in order for the job to proceed, I will have a licensed contractor come in and obtain a new permit as taking the job over. I understand that if I hire subcontractors under a contract price, that they must be licensed to work in Columbia County, i.e. masonry, drywall, carpentry. Contractors licensed by the Columbia County Contractor Licensing Section or the State of Florida are required to have worker's compensation and liability coverage.

☒ Single Family Dwelling
☐ Other _____

TYPE OF CONSTRUCTION

☐ Two-Family Residence ☐ Farm Outbuilding
☐ Addition, Alteration, Modification or other Improvement

I, Diane Shepherd, have been advised of the above disclosure statement for exemption from contractor licensing as an owner/builder. I agree to comply with all requirements provided for in Florida Statutes ss.489.103(7) allowing this exception for the construction permitted by Columbia County Building

Permit Number _____

NOTARY PUBLIC-STATE OF FLORIDA



Linda R. Roder
Commission #DD755608
Expires: MAR. 24, 2012
BONDED THRU ATLANTIC BONDING CO., INC.

Diane Shepherd
Owner Builder Signature

Date _____

FLORIDA NOTARY

The above signer is personally known to me or produced identification ☒

Notary Signature Linda Roder Date 5-15-09

FOR BUILDING DEPARTMENT USE ONLY

I hereby certify that the above listed owner/builder has been notified of the disclosure statement in Florida Statutes ss 489.103(7). Date _____ Building Official/Representative _____

1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND/OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL TO THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).



COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787
PHONE: (386) 758-1125 • FAX: (386) 758-1365 • Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

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

DATE REQUESTED: 11/13/2008 DATE ISSUED: 11/14/2008

ENHANCED 9-1-1 ADDRESS:

1223 SW NEWTON CIR
FORT WHITE FL 32038

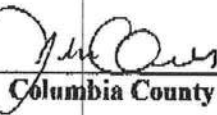
PROPERTY APPRAISER PARCEL NUMBER:

08-6S-17-09626-116

Remarks:

LOT 16 TUSTENUGGEE HILLS S/D

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.

1329

THIS INSTRUMENT WAS PREPARED BY:

TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

Recording Fee \$ 18.50
Documentary Stamp \$ 70
CONSIDERATION \$0

RETURN TO:

TERRY McDAVID
POST OFFICE BOX 1328
✓ LAKE CITY, FL 32056-1328

File No. 08-315

Property Appraiser's
Parcel Identification No.
09626-116

Inst. 200812020693 Date: 11/14/2008 Time: 3:46 PM
Doc. Stamp-Deed: 0.70
✓ DC, P. DeWitt Cason, Columbia County Page 1 of 2 B: 1162 P: 493

WARRANTY DEED

THIS INDENTURE, made this 14th day of November 2008, BETWEEN CHARLES R. HARRIS, unmarried, whose post office address is 372 SW Morningstar Glen, Ft. White, FL 32038, of the County of Alachua, State of Florida, grantor*, and DIANE SHEPHERD, whose post office address is 372 SW Morningstar Glen, Ft. White, FL 32038, of the County of Columbia, State of Florida, grantee*.

WITNESSETH: that said grantor, for and in consideration of the sum of Ten 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 16 of TUSTENUGGEE HILLS, a subdivision, according to the Plat thereof as recorded in Plat Book 5, Page 140 of the Public Records of Columbia County, Florida.

SUBJECT TO: Restrictions, easements and outstanding mineral rights of record, if any, and taxes for the current year.

and said grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

*"Grantor" and "grantee" are used for singular or plural, as context requires.

IN WITNESS WHEREOF, grantor has hereunto set grantor's hand
and seal the day and year first above written.

Signed, sealed and delivered
in our presence:

DeEtte F. Brown
(First Witness)

Charles R. Harris (SEAL)
CHARLES R. HARRIS

DeEtte F. Brown
Printed Name

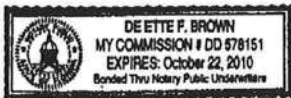
Myrtle Ann McElroy
(Second Witness)
Myrtle Ann McElroy
Printed Name

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 14th
day of November, 2008, by CHARLES R. HARRIS, who is personally
known to me or who has produced _____ as
identification and who did not take an oath.

My Commission Expires:

DeEtte F. Brown
Notary Public



NOTICE OF COMMENCEMENT

Tax Parcel Identification Number 08-65-17-09626-116

County Clerk's Office Stamp or Seal

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 16 Tustenuggee Hills
a) Street (job) Address: 1223 SW Newton Circle, Ft White, FL 32038
2. General description of improvements: Single family dwelling
Ft White, FL 32038
3. Owner Information
a) Name and address: Diane Shepherd 372 SW Morningstar Glen
b) Name and address of fee simple titleholder (if other than owner) NA
c) Interest in property homesite
4. Contractor Information
a) Name and address: owner/builder Diane Shepherd 1223 SW Newton Cir
b) Telephone No.: 386-155-1559 Fax No. (Opt.) Ft White, FL 32038
5. Surety Information
a) Name and address: NA
b) Amount of Bond: _____
c) Telephone No.: _____ Fax No. (Opt.) _____
6. Lender
a) Name and address: NA
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: NA
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: NA
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. X Diane Shepherd
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
Diane Shepherd
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 15 day of May, 2009, by:
_____ 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 _____

Notary Signature Linda Roder Notary Stamp or Seal:

NOTARY PUBLIC-STATE OF FLORIDA
Linda R. Roder
Commission #DD755608
Expires: MAR. 24, 2012
BONDED THRU ATLANTIC BONDING CO., INC.

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.

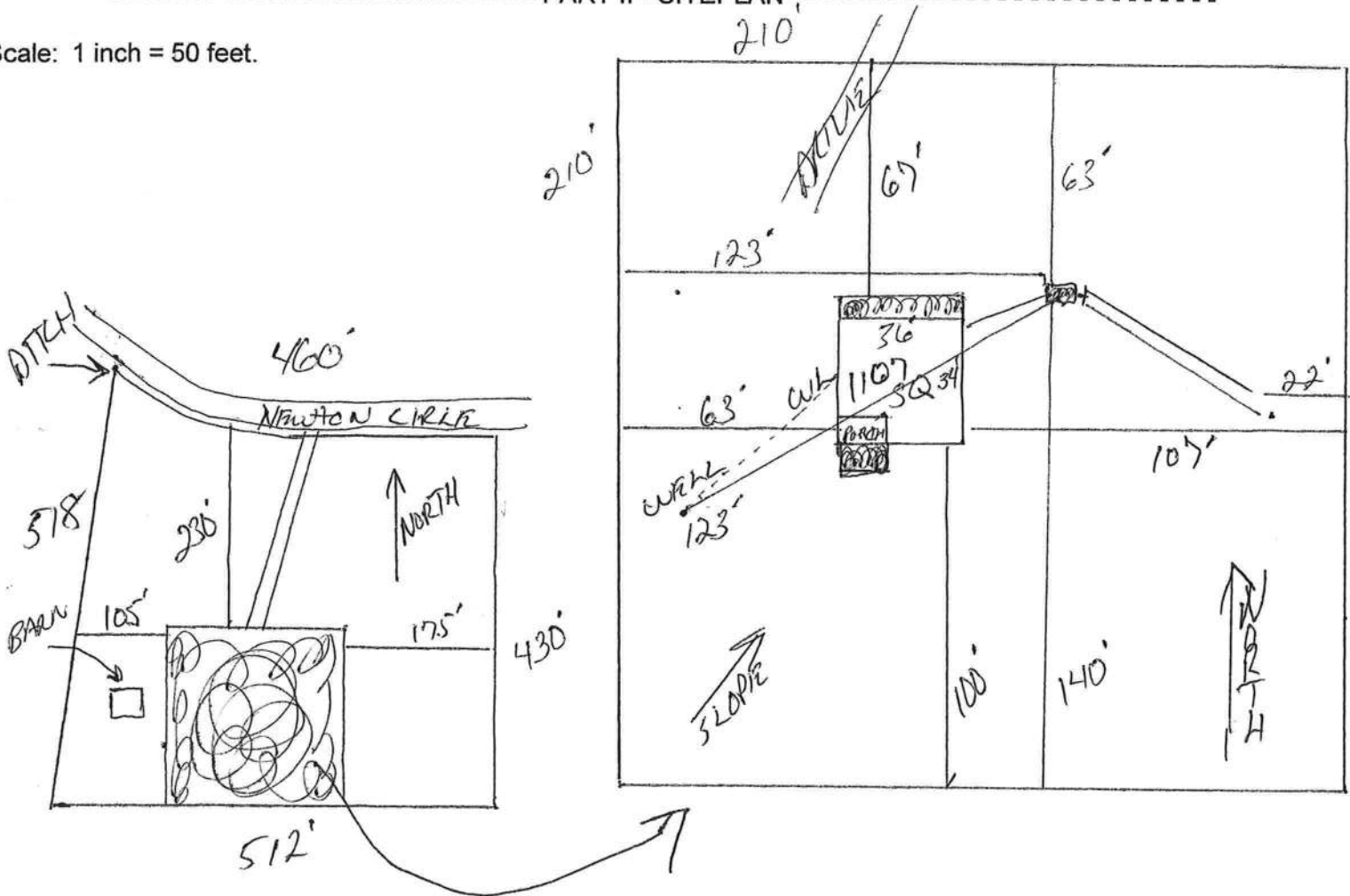
X Diane Shepherd
Signature of Natural Person Signing (in line #10 above.)

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

Permit Application Number 09-0315E

----- PART II - SITEPLAN -----

Scale: 1 inch = 50 feet.



Notes: 1 of 4.88 Acres

Site Plan submitted by: Rock D F
Plan Approved: [Signature]
By: [Signature]

MASTER CONTRACTOR

Date 6/3/9

Not Approved _____

Columbia CHD

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs Residential Performance Method A

Project Name: Harris-Shepherd
 Street:
 City, State, Zip: fort white, fl, -3203
 Owner: Harris-Shepherd
 Design Location: FL, Gainesville

Builder Name: TIMMY'S HEATING & AIR INC.
 Permit Office: *Columbus*
 Permit Number: *27850*
 Jurisdiction: *221006*

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	1	
5. Is this a worst case?	No	
6. Conditioned floor area (ft ²)	1080	
7. Windows	Description	Area
a. U-Factor:	Dbl, U=0.47	102.30 ft ²
SHGC:	SHGC=0.36	
b. U-Factor:	N/A	ft ²
SHGC:		
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	1080.00 ft ²
b. N/A	R=	ft ²
c. N/A	R=	ft ²

9. Wall Types	Insulation	Area
a. Frame - Wood, Exterior	R=13.0	1120.10 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	1080.00 ft ²
b. N/A	R=	ft ²
c. N/A	R=	ft ²
11. Ducts		
a. Sup: Interior Ret: Interior AH: Interior Sup. R= 6, 200 ft ²		
12. Cooling systems		
a. Central Unit	Cap: 23.2 kBtu/hr	SEER: 14
13. Heating systems		
a. Electric Heat Pump	Cap: 23.2 kBtu/hr	HSPF: 7.7
14. Hot water systems		
a. Electric	Cap: 40 gallons	EF: 0.92
b. Conservation features	None	
15. Credits	Pstat	

Glass/Floor Area: 0.095

Total As-Built Modified Loads: 19.56

Total Baseline Loads: 25.19

PASS

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

PREPARED BY: *[Signature]*DATE: *5-18-09*

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

OWNER/AGENT: *[Signature]*

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: _____

- Compliance requires an envelope leakage test report, by a Florida Class 1 Rater, in accordance with N1113.A.1.

PROJECT

Title: Harris-Shepherd	Bedrooms: 1	Address Type: Street Address
Building Type: FLAsBuilt	Bathrooms: 0	Lot #
Owner: Harris-Shepherd	Conditioned Area: 1080	SubDivision:
# of Units: 1	Total Stories: 1	PlatBook:
Builder Name: TIMMY'S HEATING & AIR IN	Worst Case: No	Street:
Permit Office:	Rotate Angle: 0	County: columbia
Jurisdiction:	Cross Ventilation: No	City, State, Zip: fort white ,
Family Type: Single-family	Whole House Fan: No	fl , -3203
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	140 ft	0	1080 ft²	0	0	1

ROOF

✓	#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	Tested	Deck Insul.	Pitch
✓		Hip	Metal	1170 ft²	0 ft²	Medium	0.96	No	0	22.60000

ATTIC

✓	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
✓		Full attic	Vented	300	1080 ft²	N	N

CEILING

✓	#	Ceiling Type	R-Value	Area	Framing Frac	Truss Type
✓	1	Under Attic (Vented)	30	1080 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	13	264.95 ft²	0	0.23	0.75
✓	2	S	Exterior	Frame - Wood	13	250.25 ft²	0	0.23	0.75
✓	3	E	Exterior	Frame - Wood	13	258.95 ft²	0	0.23	0.75
✓	4	W	Exterior	Frame - Wood	13	345.95 ft²	0	0.23	0.75

DOORS

✓	#	Ornt	Door Type	Storms	U-Value	Area
✓	1	W	Insulated	None	0.46	21 ft²
✓	2	W	Insulated	None	0.46	21 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	Double (Clear)	Yes	0.47	0.36		21 ft²	0 ft 0 in	0 ft 0 in	HERS 2006	None
✓	2	E	Metal	Double (Clear)	Yes	0.47	0.36		15 ft²	0 ft 0 in	0 ft 0 in	HERS 2006	None
✓	3	S	Metal	Double (Clear)	Yes	0.47	0.36		6.3 ft²	0 ft 0 in	0 ft 0 in	HERS 2006	None
✓	4	W	Metal	Double (Clear)	Yes	0.47	0.36		60 ft²	0 ft 0 in	0 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
✓	Proposed ACH	0.00036	1020	7.08	56.0	105.3	0 cfm	0 cfm	0	0

COOLING SYSTEM

✓	#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Ductless
✓	1	Central Unit	None	SEER: 14	23.2 kBtu/hr	cfm	0.7	

HEATING SYSTEM

✓	#	System Type	Subtype	Efficiency	Capacity	Ductless
✓	1	Electric Heat Pump	None	HSPF: 7.7	23.2 kBtu/hr	

HOT WATER SYSTEM

✓	#	System Type	EF	Cap	Use	SetPnt	Conservation
✓	1	Electric	0.92	40 gal	40 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	Interior	6	200 ft²	Interior	0 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:

fort white, fl, -3203

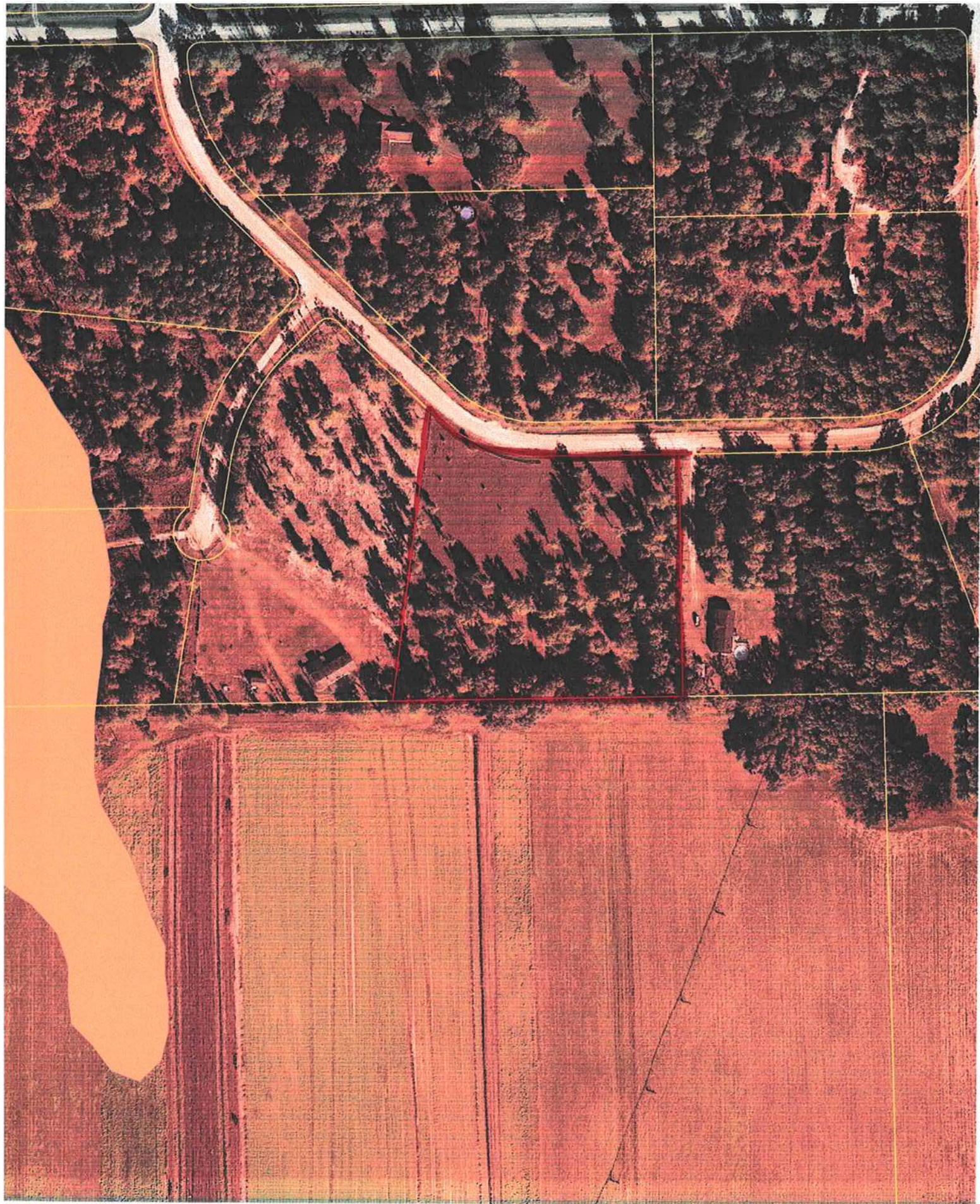
PERMIT #:

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.	
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.	
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.	



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 08-6S-17-09626-116

Building permit No. 000027850

Use Classification SFD/UTILITY

Fire: 51.36

Permit Holder DIANE SHEPHERD

Waste: 134.00

Owner of Building DIANE SHEPHERD

Total: 185.36

Location: 1223 SW NEWTON CIRCLE, FT. WHITE, FL

Date: 02/04/2010

Wayne H. Rust

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)



ITW Building Components Group, Inc.

1950 Marley Drive Haines City, FL 33844
Florida Engineering Certificate of Authorization Number: 0 278
Florida Certificate of Product Approval # FL1999
Page 1 of 1 Document ID: ITR1822820122132929

Truss Fabricator: Anderson Truss Company
Job Identification: 9-097--Fill in later JEFF SWANSON -- , **
Truss Count: 4
Model Code: Florida Building Code 2007 and 2009 Supplement
Truss Criteria: FBC2007Res/TPI-2002(STD)
Engineering Software: Alpine Software, Version 8.07.
Structural Engineer of Record: The identity of the structural EOR did not exist as of
Address: the seal date per section 61G15-31.003(5a) of the FAC
Minimum Design Loads: Roof - 40.0 PSF @ 1.25 Duration
Floor - N/A
Wind - 110 MPH ASCE 7-05 -Closed

Notes:

1. Determination as to the suitability of these truss components for the structure is the responsibility of the building designer/engineer of record, as defined in ANSI/TPI 1
2. The drawing date shown on this index sheet must match the date shown on the individual truss component drawing.
3. As shown on attached drawings; the drawing number is preceded by: HCUSR8228

Details: A1101505-GBLLETIN-A1103005-PB120-

#	Ref	Description	Drawing#	Date
1	11643--A		09112001	04/22/09
2	11644--AGE		09112002	04/22/09
3	11645--APGE		09112003	04/22/09
4	11646--AP		09112004	04/22/09

Seal Date: 04/22/2009

-Truss Design Engineer-
Doug Fleming

Florida License Number: 66648
1950 Marley Drive
Haines City, FL 33844



Technical drawing of a window blind assembly. The drawing shows a side view of the blind with horizontal slats and a vertical control cord. Dimensions are provided in feet and inches:

- Overall width: 42'
- Overall height: 36'
- Distance from left edge to control cord: 34'
- Distance from control cord to right edge: 8'
- Distance from top edge to control cord: 8'5"
- Distance from control cord to bottom edge: 33'6"

Labels include:

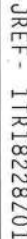
- APGE (Appliance/Power/Gear/Electrical)
- AGE (Appliance/Gear/Electrical)
- A (Appliance)
- AP (Appliance/Power)

JOB DESCRIPTION: Fill in later
/ : JEFF SWANSON

JOB NO:
9-097

PAGE NO:
1 OF 1

Bottom chord checked for 10.00 psf non-concurrent live load
Deflection meets L/240 live and L/180 total load.



(++) - This plate works for both joints covered.
110 mph wind, 15.00 ft mean hgt, ASCE 7-05, CLOS

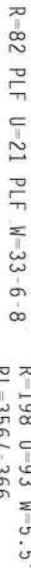
```
:Stack Chord SCI 2x4 SP #2 Dense::Rt Stubbed Wedge 2x8 SP #1 Dense:
```

Wind reactions based on MWFRS pressures.

See DWGS A11015050109 & GBLLETIN0109 for more requirements.

In lieu of structural panels use purtins to brace all flat TC @ 24" OC.

Bottom chord checked for 10.00 psf non-concurrent live load.
Deflection meets L/240 live and L/180 total load.



Design Crit: FBC2007Res/TPI-2002(STD)

$$FT/RT=20\%(0\%)/0(0)$$

8.07.00

QTY:2

FL/-/4/-/-/R/-

Scale = .1875"/Ft.

****IMPORTANT**** FURNISH A COPY OF THIS DESIGN TO THE INSTALLATION CONTRACTOR. THE BCG, INC. SHALL NOT BE RESPONSIBLE FOR ANY DEVIATION FROM THIS DESIGN. ANY FAILURE TO BUILD THE TRUSS IN CONFORMANCE WITH THE OR FABRICATING, HANDLING, SHIPPING, INSTALLING & BRACING OF TRUSSES.

7.00
017

TC LL	20.0 PSF	REF	R8228- 11644
TC DL	10.0 PSF	DATE	04/22/09
BC DL	10.0 PSF	DRW	HCUSR8228 09112002
BC LL	0.0 PSF	HC-ENG	DF/DF
TOT.LD.	40.0 PSF	SEQN-	56635
DUR.FAC.	1.25		
SPACING	24.0"	JREF -	1TR18228Z01

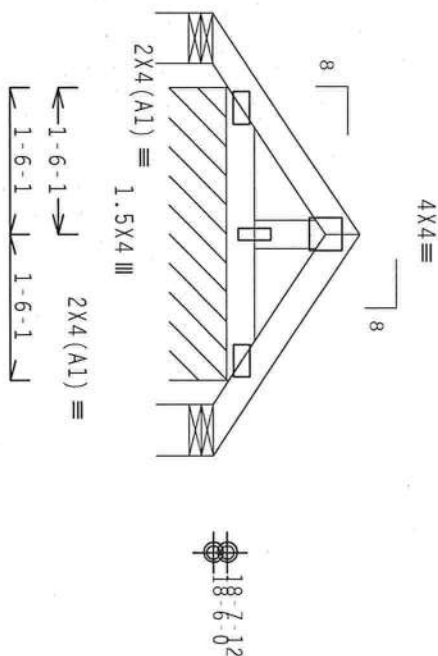
110 mph wind, 19.26 ft mean hgt, ASCE 7-05, CLOSED bldg, located anywhere in roof CAT 11, EXP C, wind TC DL=5.0 psf, wind BC DL=2.0 psf, 1w=1.00 gcpi (+/-)=0.18

Wind reactions based on MFRS pressures.

Deflection meets L/240 live and L/180 total load.

THE BUILDING DESIGNER IS RESPONSIBLE FOR THE DESIGN OF THE ROOF, FLOOR AND CEILING DIAPHRAGMS, GABLE END SHEAR WALLS AND SUPPORTING SHEAR WALLS. DIAPHRAGMS AND SHEAR WALLS MUST PROVIDE CONTINUOUS LATERAL RESTRAINT TO THE GABLE END. ALL CONNECTIONS ARE TO BE PROVIDED BY THE BUILDING DESIGNER.

Refer to DWG PB1200109 for piggyback details.



← 4-6-11 Over 3 Supports →

PLT TYP. Wave

Design Crit: FBC2007Res/TPI-2002(STD)
FT/RT=20%(0%)/0(0)

8.07.00

QTY:2 FL/-/4/-/-/R/-

Scale = .5" / Ft.

WARNING: THESE PRODUCTS REQUIRE EXTREME CARE IN FABRICATION, HANDLING, SHIPPING, INSTALLING AND BREATHING. REFER TO GC51 (BUILDING COMPONENT SAFETY INFORMATION), PUBLISHED BY TPI (TROSS PAPER INSTITUTE), 218 NORTH LEE STREET, SUITE 312, ALEXANDRIA, VA, 22314 AND UFGA (WOOD TRUSS COUNCIL OF AMERICA), 6250 ENTERPRISE LANE, MOUNTAIN VIEW, VA 22121 FOR SAFETY PRACTICES PRIOR TO PERFORMING THESE OPERATIONS. UNLESS OTHERWISE INDICATED, TOP CHORD SHALL HAVE PROPERLY ATTACHED STRUCTURAL PANELS AND BOTTOM CHORD SHALL HAVE PROPERLY ATTACHED FIELD CELLING.

IMPORTANT - FURNISH A COPY OF THIS DESIGN TO THE INSTALLATION CONTRACTOR. THE BCG, INC. SHALL NOT BE RESPONSIBLE FOR ANY DEVIATION FROM THIS DESIGN. ANY FAILURE TO BUILD THE TRUSS IN CONFORMANCE WITH THIS DESIGN SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR.

1) ON FABRICATING, HANDLING, SHIPPING, INSTALLING & BRACING OF TRUSSES. THE BCG, INC. SHALL BE RESPONSIBLE FOR THE DESIGN OF THE TRUSS AND THE CONNECTIONS BETWEEN THE TRUSS AND THE WALL PLATES. THE BCG, INC. SHALL BE RESPONSIBLE FOR THE DESIGN OF THE TRUSS AND THE CONNECTIONS BETWEEN THE TRUSS AND THE WALL PLATES.

2) DESIGN COORDINATIONS WITH APPLICABLE PROVISIONS OF NDS (NATIONAL DESIGN SPEC., BY AREA) AND TPI-1 (TECHNICAL GUIDE FOR THE DESIGN OF TRUSSES). THE BCG, INC. SHALL BE RESPONSIBLE FOR THE DESIGN OF THE TRUSS AND THE CONNECTIONS BETWEEN THE TRUSS AND THE WALL PLATES.

3) CONNECTIONS TO WALL PLATES ARE MADE OF 2X8/18G6A (OR H/552K) L5/MT A653 GRADE 40/50 (M. K/21/35) GALV. STEEL. APPLY WALL PLATES TO EACH PAIR OF TRUSSES AND, UNLESS OTHERWISE SPECIFIED ON THIS DESIGN, PER DRAWINGS 1606-2. THE BCG, INC. SHALL BE RESPONSIBLE FOR THE DESIGN OF THE TRUSS AND THE CONNECTIONS BETWEEN THE TRUSS AND THE WALL PLATES.

4) ANY INSPECTION OF PLATES FOLLOWED BY (1) SHALL BE PER AREA AS OF TPI-1 2002 SEC.3. A SEAL ON THIS DRAWING INDICATES ACCEPTANCE OF PROFESSIONAL ENGINEERING RESPONSIBILITY SOLELY FOR THE TRUSS COMPONENT OF THE DESIGN. THE SUITABILITY AND USE OF THIS COMPONENT FOR ANY BUILDING IS THE RESPONSIBILITY OF THE BUILDING DESIGNER PER AREA/TPI-1 SEC.2.

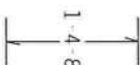


TC LL	20.0 PSF	REF	R8228- 11645
TC DL	10.0 PSF	DATE	04/22/09
BC DL	10.0 PSF	DRW	HCSR8228 09112003
BC LL	0.0 PSF	HC-ENG	DF/DF
TOT.LD.	40.0 PSF	SEON-	58641
DUR.FAC.	1.25		
SPACING	24.0"	JREF -	1TR18228Z01

המחברת מודה לפרופ' ד"ר יעקב גורן, מנהל מרכז המחקר והמחקר, על שיתוף הפעולה והסיוע.

Refer to DWG PBI200109 for piggyback details.

Deflection meets L/240 live and L/180 total load.



Scale = .5" / Ft.

Haines City, FL 33844

22.09

TC LL	20.0 PSF	REF	R8228- 11646
TC DL	10.0 PSF	DATE	04/22/09
BC DL	10.0 PSF	DRW	HCUSR8228 09112004
BC LL	0.0 PSF	HC-ENG	DF/DF
TOT.LD.	40.0 PSF	SEQN-	58638
DUR.FAC.	1.25		
SPACING	24.0"	JREF-	1TRI8228Z01

GABLE STUD REINFORCEMENT DETAIL
 FEED, 15' MEAN HEIGHT, ENCLOSED,

12" O.C.	16" O.C.	24" O.C.	PACIFIC
----------	----------	----------	---------

2x4 E VERTICAL SPECIES	BRACE GRADE	NO BRACES	(1) 1x4 "L" BRACE •		(1) 2x4 "L" BRACE •		(2) 2x4 "L" BRACE ••		(1) 2x6 "L" BRACE •		(2) 2x6 "L" BRACE ••	
			GROUP A	GROUP B	GROUP A	GROUP B	GROUP A	GROUP B	GROUP A	GROUP B	GROUP A	GROUP B
SPF	#1 / #2	3' 10"	6' 8"	6' 10"	7' 11"	8' 1"	9' 5"	9' 8"	12' 5"	12' 9"	14' 0"	14' 0"
	#3	3' 9"	6' 0"	6' 0"	7' 11"	7' 11"	9' 5"	9' 5"	12' 4"	12' 4"	14' 0"	14' 0"
	STUD	3' 9"	6' 0"	6' 0"	7' 11"	7' 11"	9' 5"	9' 5"	12' 3"	12' 3"	14' 0"	14' 0"
HF	STANDARD	3' 9"	5' 2"	5' 2"	6' 9"	6' 9"	9' 1"	9' 1"	10' 7"	10' 7"	14' 0"	14' 0"
	#1	4' 3"	6' 8"	7' 2"	7' 11"	8' 6"	9' 5"	10' 2"	12' 5"	13' 5"	14' 0"	14' 0"
	#2	4' 2"	6' 8"	7' 2"	7' 11"	8' 6"	9' 5"	10' 2"	12' 5"	13' 5"	14' 0"	14' 0"
SP	#3	4' 0"	6' 2"	6' 2"	7' 11"	8' 1"	9' 5"	9' 11"	12' 5"	12' 8"	14' 0"	14' 0"
	STUD	4' 0"	6' 1"	6' 1"	7' 11"	8' 0"	9' 5"	9' 11"	12' 5"	12' 6"	14' 0"	14' 0"
	STANDARD	3' 10"	5' 3"	5' 3"	6' 11"	6' 11"	9' 4"	9' 4"	10' 10"	10' 10"	14' 0"	14' 0"
SPF	#1 / #2	4' 5"	7' 8"	7' 10"	9' 1"	9' 4"	10' 10"	11' 1"	14' 0"	14' 0"	14' 0"	14' 0"
	#3	4' 4"	7' 4"	7' 4"	9' 1"	9' 1"	10' 10"	10' 10"	14' 0"	14' 0"	14' 0"	14' 0"
	STUD	4' 4"	7' 4"	7' 4"	9' 1"	9' 1"	10' 10"	10' 10"	14' 0"	14' 0"	14' 0"	14' 0"
HF	STANDARD	4' 4"	6' 4"	6' 4"	8' 4"	8' 4"	10' 10"	10' 10"	12' 11"	12' 11"	14' 0"	14' 0"
	#1	4' 10"	7' 8"	8' 3"	9' 1"	9' 9"	10' 10"	11' 8"	14' 0"	14' 0"	14' 0"	14' 0"
	#2	4' 9"	7' 8"	8' 3"	9' 1"	9' 9"	10' 10"	11' 8"	14' 0"	14' 0"	14' 0"	14' 0"
SP	#3	4' 6"	7' 7"	7' 7"	9' 1"	9' 6"	10' 10"	11' 4"	14' 0"	14' 0"	14' 0"	14' 0"
	STUD	4' 6"	7' 6"	7' 6"	9' 1"	9' 6"	10' 10"	11' 4"	14' 0"	14' 0"	14' 0"	14' 0"
	STANDARD	4' 5"	6' 5"	6' 5"	8' 6"	8' 6"	10' 10"	11' 1"	13' 3"	13' 3"	14' 0"	14' 0"
DHL	#1 / #2	4' 11"	8' 5"	8' 8"	10' 0"	10' 3"	11' 11"	12' 3"	14' 0"	14' 0"	14' 0"	14' 0"
	#3	4' 9"	8' 5"	8' 5"	10' 0"	10' 0"	11' 11"	11' 11"	14' 0"	14' 0"	14' 0"	14' 0"
	STUD	4' 9"	8' 5"	8' 5"	10' 0"	10' 0"	11' 11"	11' 11"	14' 0"	14' 0"	14' 0"	14' 0"
SPF	STANDARD	4' 9"	7' 3"	7' 3"	9' 7"	9' 7"	11' 11"	11' 11"	14' 0"	14' 0"	14' 0"	14' 0"
	#1	5' 4"	8' 5"	9' 1"	10' 0"	10' 9"	11' 11"	12' 10"	14' 0"	14' 0"	14' 0"	14' 0"
	#2	5' 3"	8' 5"	9' 1"	10' 0"	10' 9"	11' 11"	12' 10"	14' 0"	14' 0"	14' 0"	14' 0"
DHL	#3	5' 0"	8' 5"	8' 5"	10' 0"	10' 6"	11' 11"	12' 6"	14' 0"	14' 0"	14' 0"	14' 0"
	STUD	5' 0"	8' 5"	8' 5"	10' 0"	10' 6"	11' 11"	12' 6"	14' 0"	14' 0"	14' 0"	14' 0"
	STANDARD	4' 11"	7' 5"	7' 5"	9' 10"	9' 10"	11' 11"	12' 3"	14' 0"	14' 0"	14' 0"	14' 0"

BRACING GROUP SPECIES AND GRADES:

GROUP A:

SPRUCE-PINE-FIR		HEM-FIR	
#1 / #2	STANDARD	#2	STUD
#3	STUD	#3	STANDARD

DOUGLAS FIR-LARCH

#3

STUD

STANDARD

SOUTHERN PINE

#3

STUD

STANDARD

GROUP B:	
HEM-FIR	
#1	& BTR
#1	

GABLE TRUSS DETAIL NOTES:

LIVE LOAD DEFLECTION CRITERIA IS $L/240$.

PROVIDE UPLIFT CONNECTIONS FOR 80 PLF OVER
CONTINUOUS BEARING (5 PSF TC DEAD LOAD).

GABLE END SUPPORTS LOAD FROM 4' 0" OUTLOOKERS WITH 2' 0" OVERHANG, OR 12"

PLYWOOD OVERHANG.

ATTACH EACH "L" BRACE WITH 10D NAILS

(0.128 x3 min)

* FOR (1) "L" BRACE: SPACE NAILS AT 2" O.C. IN 18" END ZONES AND 4" O.C. BETWEEN ZONES

*** FOR (2) "1" BRACES. SPACE NAILS AT 3" OC.

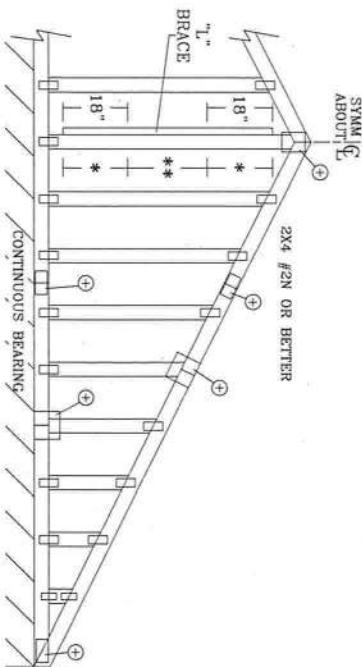
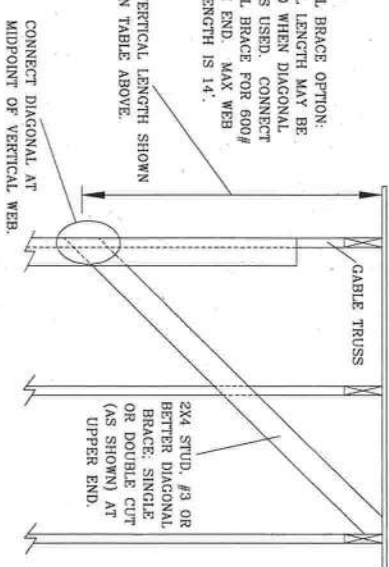
IN 18" END ZONES AND 6" O.C. BETWEEN ZONES

"L" BRACING MUST BE A MINIMUM OF 80% OF WEB MEMBER LENGTH.

CABLE VERTICAL PLATE SIZES	
VERTICAL LENGTH	NO SPLICE

LESS THAN 4' 0"	1X4 OR 2X3
GREATER THAN 4' 0", BUT LESS THAN 11' 6"	2.5X4
GREATER THAN 11' 6"	3X4

+ REFER TO COMMON TRUSS DESIGN FOR
PEAK/SPLICE AND HEEL PLATES.



REFER TO CHART ABOVE FOR MAX GABLE VERTICAL LENGTH.

WARNING READ AND FOLLOW ALL NOTES ON THIS SHEET

Buildings require extreme care in fabricating, handling, shipping, installing and bracing. Refer to and follow the following information for details on the design and construction of bracing systems. For more information, see the following sections of the BCS1 Building Component Safety Information, by TPI and WTC: for safety practices prior to performing these functions. Installers should provide temporary bracing per BCS1. Unless noted otherwise, top chord shall have properly attached structural panels and bottom chord shall have a properly attached rigid section. Locations shown for permanent lateral restraint of webs shall have bracing installed per BCS1 sections B3 & B7. See this job's general notes page for more information.

••IMPORTANT•• FURNISH COPY OF THIS DESIGN TO INSTALLATION CONTRACTOR.

ITW Building Components Group Inc. (ITWBCG) shall not be responsible for any deviation from this design, any failure to build the truss in conformance with TPL, or fabricating, handling, shipping, installing &

draining of truss steel. IWBSC connector plates are made to 20/10/100A (R/S/S/A) ASTM A588 Grade 50/60 (K/W/H/S) galv. steel. Apply plates to each face of truss, positioned as shown above and on joint details.

responsibility of the Building Designer per ANST/CP1.1 Sec. 2 for the Trust component design shown. The suitability for any building is the

responsibility of the building designer. For more information, see:

ITW-BGC: www.itwbgc.com; TPI: www.tpinst.com; WTCA: www.sbcindustry.com; ICC: www.iccsafe.org



TN

Building Components Group Inc

Earth City, MO 63045

MAX. TOT. LD. 60 PSF

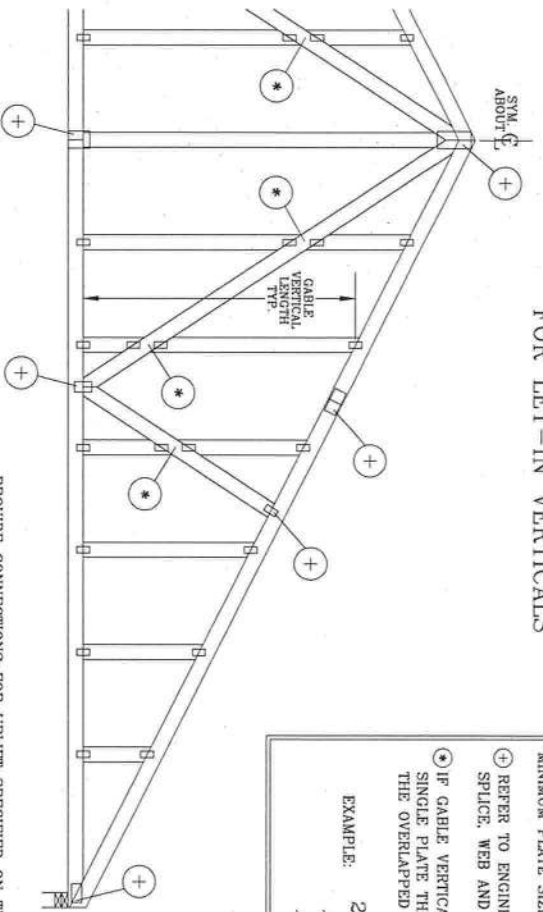
MAX. SPACING 24.0"

REF ASCE7-05-GAB1015

DATE 1/1/09

DRWG A11015050109

GABLE DETAIL FOR LET-IN VERTICALS



CABLE TRUSS PLATE SIZES

REFER TO APPROPRIATE ITW GABLE DETAIL FOR MINIMUM PLATE SIZES FOR VERTICAL STUDS.

⊕ REFER TO ENGINEERED TRUSS DESIGN FOR PEAK SPLICE, WEB AND HEEL PLATES.

⊙ IF GABLE VERTICAL PLATES OVERLAP, USE A SINGLE PLATE THAT COVERS THE TOTAL AREA OF THE OVERLAPPED PLATES TO SPAN THE WEB.

EXAMPLE:



PROVIDE CONNECTIONS FOR UPLIFT SPECIFIED ON THE ENGINEERED TRUSS DESIGN.

ATTACH EACH "T" REINFORCING MEMBER WITH

END DRIVEN NAILS:

10d COMMON (0.148" X 3.1" MIN) NAILS AT 4" O.C. PLUS

(4) NAILS IN TOP AND BOTTOM CHORD.

TOENailed NAILS:

10d COMMON (0.148" X 3.1" MIN) TOENAILS AT 4" O.C. PLUS

(4) TOENAILS IN TOP AND BOTTOM CHORD.

THIS DETAIL TO BE USED WITH THE APPROPRIATE ITW GABLE DETAIL FOR ASCE

WIND LOAD.

ASCE 7-98 GABLE DETAIL DRAWINGS

A13015980109, A12015980109, A11015980109,

A13030980109, A12030980109, A11030980109

ASCE 7-02 GABLE DETAIL DRAWINGS

A13015020109, A12015020109, A11015020109,

A1303020109, A1203020109, A1103020109,

A13015050109, A12015050109, A11015050109,

A1303050109, A1203050109, A1103050109,

A13015050109, A12015050109, A11015050109,

A1303050109, A1203050109, A1103050109,

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A13015050109, A12015050109, A11015050109,

A1303050109, A1203050109, A1103050109,

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A13015050109, A12015050109, A11015050109,

A1303050109, A1203050109, A1103050109,

A13015050109, A12015050109, A11015050109,

A1303050109, A1203050109, A1103050109,

"T" REINFORCEMENT ATTACHMENT DETAIL

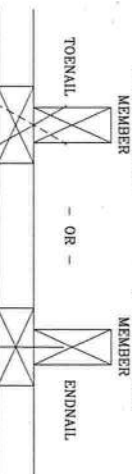
"T" REINFORCING MEMBER

"T" REINFORCING MEMBER

TOENAIL

- OR -

ENDNAIL



TO CONVERT FROM "L" TO "T" REINFORCING MEMBERS, MULTIPLY "T" INCREASE BY LENGTH (BASED ON APPROPRIATE ITW GABLE DETAIL).

MAXIMUM ALLOWABLE "T" REINFORCED GABLE VERTICAL LENGTH IS 14' FROM TOP TO BOTTOM CHORD.

WEB LENGTH INCREASE W/ "T" BRACE

WIND SPEED AND MRH	"T" REINF. MBR. SIZE	"T" INCREASE
140 MPH	2x4	10 %
15 FT	2x6	50 %
140 MPH	2x4	10 %
30 FT	2x6	50 %
130 MPH	2x4	10 %
15 FT	2x6	50 %
130 MPH	2x4	10 %
30 FT	2x6	50 %
120 MPH	2x4	10 %
15 FT	2x6	50 %
120 MPH	2x4	10 %
30 FT	2x6	50 %
110 MPH	2x4	10 %
15 FT	2x6	50 %
110 MPH	2x4	10 %
30 FT	2x6	50 %
100 MPH	2x4	10 %
15 FT	2x6	50 %
100 MPH	2x4	10 %
30 FT	2x6	50 %
90 MPH	2x4	20 %
15 FT	2x6	20 %
90 MPH	2x4	20 %
30 FT	2x6	30 %

EXAMPLE:

ASCE WIND SPEED = 100 MPH

MEAN ROOF HEIGHT = 30 FT, Kzt = 1.00

GABLE VERTICAL = 24" O.C. SP #3

"T" REINFORCING MEMBER SIZE = 2x4

(1) 2x4 "L" BRACE LENGTH = 6' 7"

MAXIMUM "T" REINFORCED GABLE VERTICAL LENGTH

1.10 x 6' 7" = 7' 3"



Building Components Group Inc.

Earth City, MO 63045

REF LET-IN VERT

DATE 1/1/09

DRWG GBLLETTNO109

MAX TOT. LD. 60 PSF

PUR. PAC. ANY

MAX SPACING 24.0"



ASCE '7-05: 110 MPH WIND SPEED, 30' MEAN HEIGHT, ENCLOSED, I = 1.00, EXPOSURE C, Kzt = 1.00

GABLE STUD REINFORCEMENT DETAIL

2x4 GABLE VERTICAL		BRACE		NO		(1) 1x4 "L" BRACE *		(1) 2x4 "L" BRACE *		(2) 2x4 "L" BRACE **		(1) 2x6 "L" BRACE *		(2) 2x6 "L" BRACE **	
SPACING	SPECIES	GRADE	BRACE	BRACES	GROUP	GROUP	GROUP	GROUP	GROUP	GROUP	GROUP	GROUP	GROUP	GROUP	GROUP
12" O.C.	SPF	#1 / #2	STUD	3' 8"	6' 4"	5' 5"	5' 5"	7' 2"	7' 2"	8' 11"	8' 11"	11' 2"	11' 2"	14' 0"	14' 0"
				3' 7"	5' 5"	5' 5"	5' 5"	7' 1"	7' 1"	8' 11"	8' 11"	11' 1"	11' 1"	14' 0"	14' 0"
				3' 7"	5' 5"	5' 5"	5' 5"	7' 1"	7' 1"	8' 11"	8' 11"	11' 1"	11' 1"	14' 0"	14' 0"
				3' 7"	5' 5"	5' 5"	5' 5"	7' 1"	7' 1"	8' 11"	8' 11"	11' 1"	11' 1"	14' 0"	14' 0"
				3' 7"	5' 5"	5' 5"	5' 5"	7' 1"	7' 1"	8' 11"	8' 11"	11' 1"	11' 1"	14' 0"	14' 0"
16" O.C.	SPF	#1 / #2	STUD	4' 0"	6' 4"	6' 10"	6' 10"	7' 6"	7' 6"	8' 11"	8' 11"	9' 7"	11' 9"	12' 8"	14' 0"
				3' 11"	6' 4"	6' 10"	6' 10"	7' 6"	7' 6"	8' 11"	8' 11"	9' 7"	11' 9"	12' 8"	14' 0"
				3' 11"	6' 4"	6' 10"	6' 10"	7' 6"	7' 6"	8' 11"	8' 11"	9' 7"	11' 9"	12' 8"	14' 0"
				3' 11"	6' 4"	6' 10"	6' 10"	7' 6"	7' 6"	8' 11"	8' 11"	9' 7"	11' 9"	12' 8"	14' 0"
				3' 11"	6' 4"	6' 10"	6' 10"	7' 6"	7' 6"	8' 11"	8' 11"	9' 7"	11' 9"	12' 8"	14' 0"
24" O.C.	SPF	#1 / #2	STUD	3' 9"	5' 6"	5' 6"	5' 6"	7' 3"	7' 3"	8' 11"	8' 11"	9' 5"	11' 4"	14' 0"	14' 0"
				3' 9"	5' 6"	5' 6"	5' 6"	7' 3"	7' 3"	8' 11"	8' 11"	9' 5"	11' 4"	14' 0"	14' 0"
				3' 9"	5' 6"	5' 6"	5' 6"	7' 3"	7' 3"	8' 11"	8' 11"	9' 5"	11' 4"	14' 0"	14' 0"
				3' 9"	5' 6"	5' 6"	5' 6"	7' 3"	7' 3"	8' 11"	8' 11"	9' 5"	11' 4"	14' 0"	14' 0"
				3' 9"	5' 6"	5' 6"	5' 6"	7' 3"	7' 3"	8' 11"	8' 11"	9' 5"	11' 4"	14' 0"	14' 0"

GABLE TRUSS DETAIL NOTES:

LIVE LOAD DEFLECTION CRITERIA IS L/240.

PROVIDE UP/LIFT CONNECTIONS FOR 100 PLF OVER CONTINUOUS BEARING (5 PSF TC DEAD LOAD).

GABLE END SUPPORTS LOAD FROM 4' 0" OUTLOOKERS WITH 2' 0" OVERHANG, OR 12" PLYWOOD OVERHANG.

ATTACH EACH "L" BRACE WITH 10d NAILS.

* FOR (1) "L" BRACE: SPACE NAILS AT 2' O.C. IN 16" END ZONES AND 4' O.C. BETWEEN ZONES.

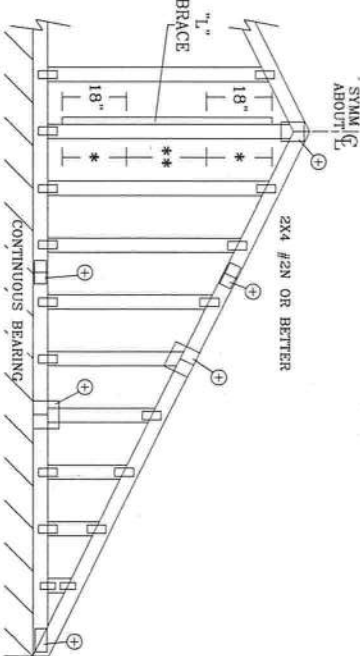
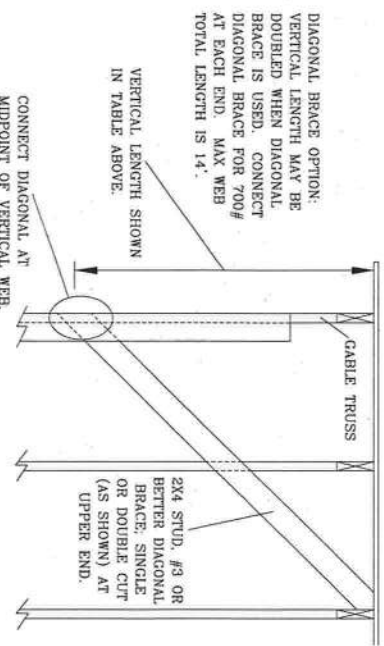
** FOR (2) "L" BRACES: SPACE NAILS AT 3' O.C. IN 16" END ZONES AND 6' O.C. BETWEEN ZONES.

"L" BRACING MUST BE A MINIMUM OF 80% OF WEB MEMBER LENGTH.

GABLE VERTICAL PLATE SIZES	
VERTICAL LENGTH	NO SPLICE
LESS THAN 4' 0"	1x4 OR 2x3
GREATER THAN 4' 0", BUT LESS THAN 11' 6"	2 5x4
GREATER THAN 11' 6"	3x4

+ REFER TO COMMON TRUSS DESIGN FOR PEAK, SPLICE, AND HEEL PLATES.

REFER TO CHART ABOVE FOR MAX GABLE VERTICAL LENGTH.



Building Components Group Inc.

Earth City, MO 63045

WARNING READ AND FOLLOW ALL NOTES ON THIS SHEET. Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to and follow BCSI (Building Component Safety Information, by TPI and WPCA) for safety practices prior to performing any field work. Trusses are designed and engineered for specific conditions and loads. Trusses should be properly attached to the building frame and braced in accordance with the design and engineering. Locations shown for permanent lateral restraint of webs shall have bracing installed per BCSI sections B1 & B7. See this job's general notes page for more information.

IMPORTANT FURNISH COPY OF THIS DESIGN TO INSTALLATION CONTRACTOR. Trusses are designed and engineered for specific conditions and loads. Trusses should be properly attached to the building frame and braced in accordance with the design and engineering. Locations shown for permanent lateral restraint of webs shall have bracing installed per BCSI sections B1 & B7. See this job's general notes page for more information.



MAX. TOT. LD. 60 PSF

MAX. SPACING 24.0"

REF	ASCE7-05-CAB11030
DATE	1/1/09
DRWG	A11030050109

UP TO 120 MPH WIND, 30.00 FT MEAN HGT, ASCE 7-02 OR ASCE 7-05, ENCLOSED BLDG, LOCATED ANYWHERE IN ROOF, CAT II, EXP C, WIND DL=5.0 PSF KZT=1.0.

MAXIMUM TRUSS SPACING IS 24" O.C.
DETAIL IS NOT APPLICABLE IF CAP SUPPORTS ADDITIONAL LOADS SUCH AS
CUPOLA, STEEPLE, CHIMNEY OR DRAG STRUT LOADS.

NOTE: TOP CHORDS OF TRUSSES SUPPORTING PIGGYBACK CAP TRUSSES MUST BE ADEQUATELY BRACED BY SHEATHING OR PURLINS. THE BUILDING ENGINEER OF RECORD SHALL PROVIDE DIAGONAL BRACING OR OTHER SUITABLE ANCHORAGE TO PERMANENTLY RESTRAIN PURLINS.

** REFER TO ENGINEER'S SEALED TRUSS DESIGN DRAWING FOR PIGGYBACK AND BASE TRUSS SPECIFICATIONS.

Diagram illustrating the attachment of purlins to a top chord scab. The diagram shows a side view of a roof structure with a top chord scab and purlins. The purlin spacing is indicated as 24" O.C. OR LESS. The attachment detail shows a purlin being attached to the top chord scab using two 16d bolts. The dimensions for the attachment are 4' for the total length of the purlin over the scab, and 2' for the distance from the end of the purlin to the center of the bolts. A note indicates that the purlin should be attached with 2x4 #3 grade, attached with 2 rows of 1/2" bolts.

PIGgyBACK CAP TRUSS SLANT NAILED TO ALL TOP CHORD PURLIN BRACING WITH (2) 16d BOX NAILS (0.135"x3.5") AND SECURE TOP CHORD WITH 2X4 #3 GRADE SCAB (1 SIDE ONLY AT EACH END), ATTACHED WITH 2 ROWS OF 10d BOX NAILS (0.128"x3.0") AT 4" O.C.

ATTACH PURLIN BRACING TO THE FLAT TOP CHORD
USING (2) 16d BOX NAILS (0.135"x3.5")

PICGBACK CAP TRUSS NAILED TO TOP CHORD OF BASE TRUSS AND SECURED WITH 2x4 SPP#2, FULL CHORD DEPTH SCABS @ 8" O.C. EACH FACE, STAGGERED 4" O.C. ATTACH WITH 3 10d BOX NAILS @ 0.128"x3" INTO BOTH CHORDS (TOTAL OF 6 NAILS PER SCAB) AS SHOWN BY CIRCLED NUMBER.

PIGGYBACK CAP TRUSS SLANT NAILED TO ALL TOP CHORD PURLIN BRACING WITH (2) 16d BOX NAILS (0.135"x3.5") AND SECURE TOP CHORD WITH 2X4 #3 GRADE SCAB (1 SIDE ONLY AT EACH END) ATTACHED WITH 2 ROWS OF 10d BOX NAILS (0.128"x3.0") AT 4" O.C.

ATTACH PURLIN BRACING TO THE FLAT TOP CHORD
USING (2) 16d BOX NAILS (0.135"x3.5")

ALTERNATE ATTACHMENTS

TRILUX
USE 3x8 TRILUX PLATES FOR 2x4 CHORD MEMBER, AND 3x10 TRILUX PLATES FOR 2x6 AND LARGER CHORD MEMBERS. ATTACH TO EACH FACE @ 8 O.C. WITH (4) 0.120 x1.375 NAILS INTO CAP BOTTOM CHORD AND (4) 0.120 x1.375 NAILS INTO TRILUX PLATES. MAY BE STAGGERED 4 O.C. FRONT TO BACK FACES.

PLYWOOD GUSSET
8"x8"x1/2" RATED SHEATHING GUSSETS (EACH FACE). ATTACH @ 8 O.C. WITH (9) 6d COMMON (0.113"x2") NAILS PER GUSSET. (4) IN CAP BOTTOM CHORD AND (4) IN BASE TRUSS TOP CHORD. GUSSETS MAY BE STAGGERED 4 O.C. FRONT TO BACK FACES.

****WARNING** READ AND FOLLOW ALL NOTES ON THIS SHEET!**

Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to and follow the following information for details on the proper installation of the trusses. For more information on the various trussing functions, installers should provide temporary bracing per BCSI. Unless noted otherwise, top chord shall have properly attached structural panels and bottom chord shall have a properly attached rigid ceiling. Locations shown for permanent lateral restraint of webs shall have bracing installed per BCSI sections B3 & B7. See this job's general notes page for more information.

••IMPORTANT•• FURNISH COPY OF THIS DESIGN TO INSTALLATION CONTRACTOR.

ITW Building Components Group Inc. (ITWBCG) shall not be responsible for any deviation from this design, or for any failure to build the truss in conformance with TPI, or fabricating, handling, shipping, installing &

breeding of truss. FHBCG connector plates are made of 20/18/16G4 (W/H/S/K) ASTM A653 grade 37-40/60 (K/M/H/S) galv. steel. Apply plates to each face of truss, positioned as shown above and on Joint Details. A seal on this drawing or cover page indicates acceptance and professional engineering responsibility solely for the truss component design shown. The suitability and use of this component for any building is the responsibility of the Building Designer per ANSI/TPI Sec. 2.

Building Components Group Inc.



Earth City, MO 63045



SPACING

24.0"

REF PIGGYBACK

DATE 1/1/09

DRWG PBI200109

Diane Shepherd

PRODUCT APPROVAL SPECIFICATION SHEET

Sawyer Co.

Location:

Project Name:

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			FL
1. Swinging	Masonite	Steel prehung	4904.1
2. Sliding			
3. Sectional			
4. Roll up			
5. Automatic			
6. Other			
B. WINDOWS			
1. Single hung	Betterbilt	aluminum single hung	FL 7085
2. Horizontal Slider			
3. Casement			
4. Double Hung			
5. Fixed			
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11. Dual Action			
12. Other			
C. PANEL WALL			FL
1. Siding		Kiln dried Cypress	rough lumber
2. Soffits			
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	Tamko	25 yrelife 3-tab	FL 1956.2
2. Underlayments			
3. Roofing Fasteners			
4. Non-structural Metal Rf	Wheeling	Century drain	FL 5190.3
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			

Category/Subcategory (cont.)	Manufacturer	Product Description	Approval Number(s)
13. Liquid Applied Roof Sys			
14. Cements-Adhesives - Coatings			
15. Roof Tile Adhesive			
16. Spray Applied Polyurethane Roof			
17. Other			
E. SHUTTERS			
1. Accordion			
2. Bahama			
3. Storm Panels			
4. Colonial			
5. Roll-up			
6. Equipment			
7. Others			
F. SKYLIGHTS			
1. Skylight			
2. Other			
G. STRUCTURAL COMPONENTS			
1. Wood connector/anchor			
2. Truss plates			
3. Engineered lumber			
4. Railing			
5. Coolers-freezers			
6. Concrete Admixtures			
7. Material			
8. Insulation Forms			
9. Plastics			
10. Deck-Roof			
11. Wall			
12. Sheds			
13. Other			
H. NEW EXTERIOR ENVELOPE PRODUCTS			
1.			
2.			

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

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

Contractor or Contractor's Authorized Agent Signature

Location

Print Name

Date

Permit # (FOR STAFF USE ONLY)

Diane Stephard owner-builder

Linda Rodan

51509

Linda Rodan

Project Summary
Entire House
TIMMY'S HEATING & AIR INC.

Job:
Date: Jun 13, 2008
By: Timmy Hough

1637 SW LONCALA LOOP, FORT WHITE, FL 32038 Phone: 386-497-4659 Fax: 386-497-2852 Email: timothyhough@alltel.net

Project Information

For: Harris-Shepherd

Notes:

Design Information

Weather: Gainesville, FL, US

Winter Design Conditions

Outside db	33 °F
Inside db	68 °F
Design TD	35 °F

Summer Design Conditions

Outside db	92 °F
Inside db	75 °F
Design TD	17 °F
Daily range	M
Relative humidity	50 %
Moisture difference	52 gr/lb

Heating Summary

Structure	15245 Btuh
Ducts	0 Btuh
Central vent (57 cfm)	2181 Btuh
Humidification	0 Btuh
Piping	0 Btuh
Equipment load	17426 Btuh

Sensible Cooling Equipment Load Sizing

Structure	13521 Btuh
Ducts	0 Btuh
Central vent (57 cfm)	1059 Btuh
Blower	0 Btuh
Use manufacturer's data	n
Rate/swing multiplier	0.97
Equipment sensible load	14143 Btuh

Infiltration

Method	Simplified
Construction quality	Semi-tight
Fireplaces	0

	Heating	Cooling
Area (ft ²)	1080	1080
Volume (ft ³)	8640	8640
Air changes/hour	0.31	0.16
Equiv. AVF (cfm)	45	23

Latent Cooling Equipment Load Sizing

Structure	1610 Btuh
Ducts	0 Btuh
Central vent (57 cfm)	2003 Btuh
Equipment latent load	3613 Btuh
Equipment total load	17756 Btuh
Req. total capacity at 0.70 SHR	1.7 ton

Heating Equipment Summary

Make	Lennox
Trade	XP13 Series
Model	XP13-024-230*
ARI ref no.	581392

Efficiency	7.7 HSPF
Heating input	
Heating output	22000 Btuh @ 47°F
Temperature rise	26 °F
Actual air flow	773 cfm
Air flow factor	0.051 cfm/Btuh
Static pressure	0.20 in H2O
Space thermostat	

Cooling Equipment Summary

Make	Lennox
Trade	XP13 Series
Cond	XP13-024-230*
Coil	CBX32M-030-230*
ARI ref no.	581392

Efficiency	14 EER
Sensible cooling	16240 Btuh
Latent cooling	6960 Btuh
Total cooling	23200 Btuh
Actual air flow	773 cfm
Air flow factor	0.057 cfm/Btuh
Static pressure	0.20 in H2O
Load sensible heat ratio	0.80

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.

Right-J® Worksheet
Entire House
TIMMY'S HEATING & AIR INC.

Job:
Date: Jun 13, 2008
By: Timmy Hough

1637 SW LONCALA LOOP, FORT WHITE, FL 32038 Phone: 386-497-4659 Fax: 386-497-2852 Email: timothyhough@alltel.net

1	Room name					Entire House				office				
2	Exposed wall					140.0 ft				24.0 ft				
3	Ceiling height					8.0 ft				8.0 ft				
4	Room dimensions					1080.0 ft²				140.0 ft²				
5	Room area					1080.0 ft²				140.0 ft²				
	Ty	Construction number	U-value (Btuh/ft²-°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	12C-0sw	0.091	n	3.18	2.20	272	251	799	552	80	65	207	143
11	G	4A5-2ov	0.470	n	16.45	14.44	21	0	345	303	15	0	247	217
	W	12C-0sw	0.091	e	3.18	2.20	288	252	803	554	112	97	309	213
	G	4A5-2ov	0.470	e	16.45	37.74	15	0	247	566	15	0	247	566
	D	11J0	0.600	e	21.00	17.49	21	21	441	367	0	0	0	0
	W	12C-0sw	0.091	s	3.18	2.20	272	266	846	584	0	0	0	0
	G	4A5-2ov	0.470	s	16.45	16.49	6	0	103	103	0	0	0	0
	W	12C-0sw	0.091	w	3.18	2.20	288	207	659	455	0	0	0	0
	G	4A5-2ov	0.470	w	16.45	37.74	60	0	987	2264	0	0	0	0
	D	11J0	0.600	w	21.00	17.49	21	21	441	367	0	0	0	0
	C	16B-30md	0.032	-	1.12	1.68	1080	1080	1210	1820	140	140	157	236
	F	22A-tpH	1.358	-	47.53	0.00	1080	140	6654	0	140	24	1141	0
6	c) AED excursion									638				-44
	Envelope loss/gain								13536	8573			2307	1331
12	a) Infiltration								1709	429			293	73
	b) Room ventilation								0	0			0	0
13	Internal gains:		Occupants @	230		4			920	0				0
			Appliances @	1200		3			3600	0				0
	Subtotal (lines 6 to 13)								15245	13521			2600	1404
14	Less external load								0	0			0	0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
	Subtotal								15245	13521			2600	1404
15	Duct loads						0%	0%	0	0	0%	0%	0	0
	Total room load								15245	13521			2600	1404
	Air required (cfm)								773	773			132	80

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Right-J® Worksheet
Entire House
TIMMY'S HEATING & AIR INC.

Job:
Date: Jun 13, 2008
By: Timmy Hough

1637 SW LONCALA LOOP, FORT WHITE, FL 32038 Phone: 386-497-4659 Fax: 386-497-2852 Email: timothyhough@alltel.net

1	Room name					laundry					kitchen				
2	Exposed wall					15.0 ft					26.0 ft				
3	Ceiling height					8.0 ft					8.0 ft				
4	Room dimensions					7.0 x 8.0 ft					15.0 x 11.0 ft				
5	Room area					56.0 ft²					165.0 ft²				
	Ty	Construction number	U-value (Btuh/ft²·°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)		
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool	
6 . . . 11	W	12C-0sw	0.091	n	3.18	2.20	0	0	0	0	0	0	0	0	
	G	4A5-2ov	0.470	n	16.45	14.44	0	0	0	0	0	0	0	0	
	W	12C-0sw	0.091	e	3.18	2.20	56	56	178	123	120	99	315	218	
	G	4A5-2ov	0.470	e	16.45	37.74	0	0	0	0	0	0	0	0	
	D	11J0	0.600	e	21.00	17.49	0	0	0	0	21	21	441	367	
	W	12C-0sw	0.091	s	3.18	2.20	64	64	204	141	88	82	260	180	
	G	4A5-2ov	0.470	s	16.45	16.49	0	0	0	0	6	0	103	103	
	W	12C-0sw	0.091	w	3.18	2.20	0	0	0	0	0	0	0	0	
	G	4A5-2ov	0.470	w	16.45	37.74	0	0	0	0	0	0	0	0	
	D	11J0	0.600	w	21.00	17.49	0	0	0	0	0	0	0	0	
	C	16B-30md	0.032	-	1.12	1.68	56	56	63	94	165	165	185	278	
F	22A-tpH	1.358	-	47.53	0.00	56	15	713	0	165	26	1236	0		
6	c) AED excursion									-49				-93	
	Envelope loss/gain								1158	310			2540	1052	
12	a) Infiltration								183	46			317	80	
	b) Room ventilation								0	0			0	0	
13	Internal gains:		Occupants @	230		0			0	0	0			0	
			Appliances @	1200		1			1200	2				2400	
	Subtotal (lines 6 to 13)								1341	1555			2858	3532	
14	Less external load								0	0			0	0	
	Less transfer								0	0			0	0	
	Redistribution								0	0			0	0	
15	Subtotal								1341	1555			2858	3532	
	Duct loads						0%	0%	0	0	0%	0%	0	0	
	Total room load								1341	1555			2858	3532	
	Air required (cfm)								68	89			145	202	

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Right-J® Worksheet
Entire House
TIMMY'S HEATING & AIR INC.

Job:
Date: Jun 13, 2008
By: Timmy Hough

1637 SW LONCALA LOOP, FORT WHITE, FL 32038 Phone: 386-497-4659 Fax: 386-497-2852 Email: timothyhough@alltel.net

1	Room name					greatrm					bath				
2	Exposed wall					35.0 ft					10.0 ft				
3	Ceiling height					8.0 ft 1.0 x 270.0 ft					8.0 ft 11.0 x 10.0 ft				
4	Room dimensions					270.0 ft²					110.0 ft²				
5	Room area														
	Ty	Construction number	U-value (Btuh/ft²·°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)		
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool	
6	W	12C-0sw	0.091	n	3.18	2.20	0	0	0	0	80	74	236	163	
11	G	4A5-2ov	0.470	n	16.45	14.44	0	0	0	0	6	0	99	87	
	W	12C-0sw	0.091	e	3.18	2.20	0	0	0	0	0	0	0	0	
	G	4A5-2ov	0.470	e	16.45	37.74	0	0	0	0	0	0	0	0	
	D	11J0	0.600	e	21.00	17.49	0	0	0	0	0	0	0	0	
	W	12C-0sw	0.091	s	3.18	2.20	120	120	382	264	0	0	0	0	
	G	4A5-2ov	0.470	s	16.45	16.49	0	0	0	0	0	0	0	0	
	W	12C-0sw	0.091	w	3.18	2.20	160	109	347	240	0	0	0	0	
	G	4A5-2ov	0.470	w	16.45	37.74	30	0	494	1132	0	0	0	0	
	D	11J0	0.600	w	21.00	17.49	21	21	441	367	0	0	0	0	
	C	16B-30md	0.032	-	1.12	1.68	270	270	302	455	110	110	123	185	
	F	22A-tpb	1.358	-	47.53	0.00	270	35	1664	0	110	10	475	0	
6	c) AED excursion									414				-14	
	Envelope loss/gain								3630	2872			933	421	
12	a) Infiltration								427	107			122	31	
	b) Room ventilation								0	0			0	0	
13	Internal gains:		Occupants @	230			2			460	0			0	
			Appliances @	1200			0			0	0			0	
	Subtotal (lines 6 to 13)								4057	3439			1055	451	
14	Less external load								0	0			0	0	
	Less transfer								0	0			0	0	
	Redistribution								0	0			0	0	
	Subtotal								4057	3439			1055	451	
15	Duct loads							0%	0%	0	0	0%	0%	0	0
	Total room load								4057	3439			1055	451	
	Air required (cfm)								206	197			53	26	

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Right-J® Worksheet
Entire House
TIMMY'S HEATING & AIR INC.

Job:
Date: Jun 13, 2008
By: Timmy Hough

1637 SW LONCALA LOOP, FORT WHITE, FL 32038 Phone: 386-497-4659 Fax: 386-497-2852 Email: timothyhough@alltel.net

1	Room name					masterbrdm				closet				
2	Exposed wall					30.0 ft				0 ft				
3	Ceiling height					8.0 ft 1.0 x 209.0 ft heat/cool				8.0 ft 5.0 x 6.0 ft heat/cool				
4	Room dimensions					209.0 ft²				30.0 ft²				
5	Room area													
	Ty	Construction number	U-value (Btuh/ft²-°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	12C-0sw	0.091	n	3.18	2.20	112	112	357	246	0	0	0	0
11	G	4A5-2ov	0.470	n	16.45	14.44	0	0	0	0	0	0	0	0
	W	12C-0sw	0.091	e	3.18	2.20	0	0	0	0	0	0	0	0
	G	4A5-2ov	0.470	e	16.45	37.74	0	0	0	0	0	0	0	0
	D	11J0	0.600	e	21.00	17.49	0	0	0	0	0	0	0	0
	W	12C-0sw	0.091	s	3.18	2.20	0	0	0	0	0	0	0	0
	G	4A5-2ov	0.470	s	16.45	16.49	0	0	0	0	0	0	0	0
	W	12C-0sw	0.091	w	3.18	2.20	128	98	312	215	0	0	0	0
	G	4A5-2ov	0.470	w	16.45	37.74	30	0	494	1132	0	0	0	0
	D	11J0	0.600	w	21.00	17.49	0	0	0	0	0	0	0	0
C	16B-30md	0.032	-	1.12	1.68	209	209	234	352	30	30	34	51	
F	22A-tph	1.358	-	47.53	0.00	209	30	1426	0	30	0	0	0	0
6	c) AED excursion									430				-2
	Envelope loss/gain								2822	2376			34	49
12	a) Infiltration								366	92			0	0
	b) Room ventilation								0	0			0	0
13	Internal gains:		Occupants @	230			2			460	0			0
			Appliances @	1200			0			0	0			0
	Subtotal (lines 6 to 13)								3189	2928			34	49
	Less external load								0	0			0	0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
14	Subtotal								3189	2928			34	49
15	Duct loads						0%	0%	0	0	0%	0%	0	0
	Total room load								3189	2928			34	49
	Air required (cfm)								162	167			2	3

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Right-J® Worksheet
Entire House
TIMMY'S HEATING & AIR INC.

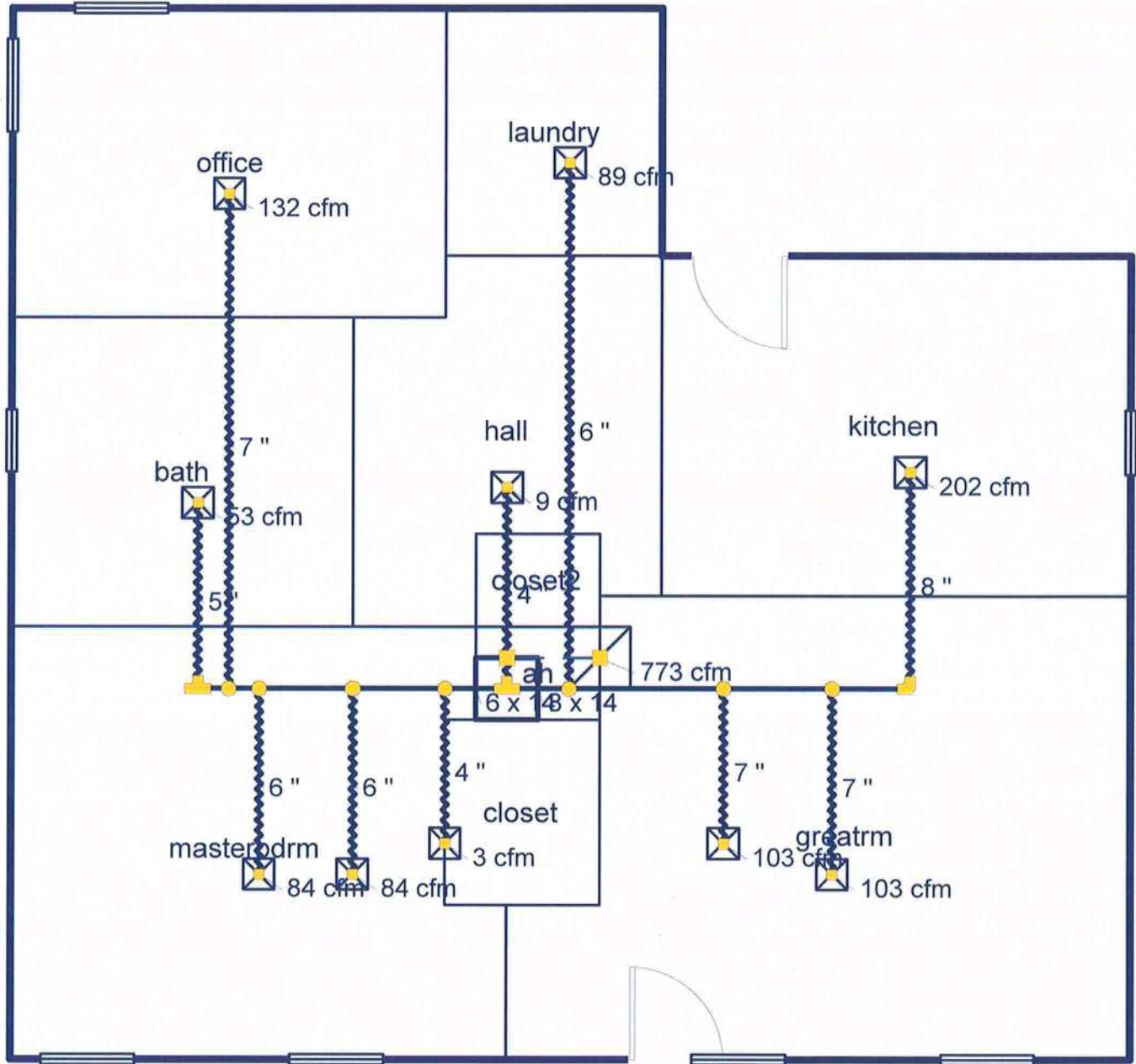
Job:
Date: Jun 13, 2008
By: Timmy Hough

1637 SW LONCALA LOOP, FORT WHITE, FL 32038 Phone: 386-497-4659 Fax: 386-497-2852 Email: timothyhough@alltel.net

1	Room name					hall								
2	Exposed wall					0 ft								
3	Ceiling height					8.0 ft				heat/cool				
4	Room dimensions					1.0 x 100.0 ft								
5	Room area					100.0 ft²								
	Ty	Construction number	U-value (Btuh/ft²·°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area or perimeter		Load	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	12C-0sw	0.091	n	3.18	2.20	0	0	0	0				
11	G	4A5-2ov	0.470	n	16.45	14.44	0	0	0	0				
	W	12C-0sw	0.091	e	3.18	2.20	0	0	0	0				
	G	4A5-2ov	0.470	e	16.45	37.74	0	0	0	0				
	D	11J0	0.600	e	21.00	17.49	0	0	0	0				
	W	12C-0sw	0.091	s	3.18	2.20	0	0	0	0				
	G	4A5-2ov	0.470	s	16.45	16.49	0	0	0	0				
	W	12C-0sw	0.091	w	3.18	2.20	0	0	0	0				
	G	4A5-2ov	0.470	w	16.45	37.74	0	0	0	0				
	D	11J0	0.600	w	21.00	17.49	0	0	0	0				
	C	16B-30md	0.032	-	1.12	1.68	100	100	112	168				
	F	22A-tph	1.358	-	47.53	0.00	100	0	0	0				
6	c) AED excursion									-5				
	Envelope loss/gain								112	163				
12	a) Infiltration								0	0				
	b) Room ventilation								0	0				
13	Internal gains:		Occupants @	230			0			0				
			Appliances @	1200			0			0				
	Subtotal (lines 6 to 13)								112	163				
	Less external load								0	0				
	Less transfer								0	0				
	Redistribution								0	0				
14	Subtotal								112	163				
15	Duct loads						0%	0%	0	0				
	Total room load										112	163		
	Air required (cfm)								6	9				

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Main floor



Job #:
Performed by Timmy Hough for:
 Harris-Shepherd

TIMMY'S HEATING & AIR INC.

1637 SW LONCALA LOOP
 FORT WHITE, FL 32038
 Phone: 386-497-4659 Fax: 386-497-2852
 timothyhough@alltel.net

Scale: 1 : 63

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Duct System Summary Entire House

TIMMY'S HEATING & AIR INC.

Job:
Date: Jun 13, 2008
By: Timmy Hough

1637 SW LONCALA LOOP, FORT WHITE, FL 32038 Phone: 386-497-4659 Fax: 386-497-2852 Email: timothyhough@alltel.net

Project Information

For: Harris-Shepherd

	Heating	Cooling
External static pressure	0.20 in H2O	0.20 in H2O
Pressure losses	0 in H2O	0 in H2O
Available static pressure	0.20 in H2O	0.20 in H2O
Supply / return available pressure	0.10 / 0.10 in H2O	0.10 / 0.10 in H2O
Lowest friction rate	0.096 in/100ft	0.096 in/100ft
Actual air flow	773 cfm	773 cfm
Total effective length (TEL)	209 ft	

Supply Branch Detail Table

Name	Design (Btuh)	Htg (cfm)	Clg (cfm)	Design FR	Diam (in)	H x W (in)	Duct Matl	Actual Ln (ft)	Ftg.Eqv Ln (ft)	Trunk
bath	h 1055	53	26	0.172	5.0	0x0	VIFx	16.0	100.0	st2
closet	c 49	2	3	0.099	4.0	0x0	VIFx	7.0	195.0	st2
greatrm	h 2029	103	98	0.107	7.0	0x0	VIFx	16.5	170.0	st1
greatrm-A	h 2029	103	98	0.104	7.0	0x0	VIFx	12.0	180.0	st1
hall	c 163	6	9	0.197	4.0	0x0	VIFx	6.5	95.0	
kitchen	c 3532	145	202	0.167	8.0	0x0	VIFx	20.0	100.0	st1
laundry	c 1555	68	89	0.096	6.0	0x0	VIFx	19.0	190.0	st1
masterbrdm	c 1464	81	84	0.103	6.0	0x0	VIFx	14.0	180.0	st2
masterbrdm-A	c 1464	81	84	0.100	6.0	0x0	VIFx	11.0	190.0	st2
office	h 2600	132	80	0.103	7.0	0x0	VIFx	25.0	170.0	st2

Supply Trunk Detail Table

Name	Trunk Type	Htg (cfm)	Clg (cfm)	Design FR	Veloc (fpm)	Diam (in)	H x W (in)	Duct Material	Trunk
st1	Peak AVF	419	487	0.096	627	11.2	14 x 8	RectFbg	
st2	Peak AVF	349	276	0.099	598	9.8	14 x 6	RectFbg	

Return Branch Detail Table

Name	Grill Size (in)	Htg (cfm)	Clg (cfm)	TEL (ft)	Design FR	Veloc (fpm)	Diam (in)	H x W (in)	Stud/Joist Opening (in)	Duct Matl	Trunk
rb1	0x0	773	773	0	0	0	0	0x 0		ShMt	