

DATE10/18/2012

Columbia County Building Permit

PERMIT000030534

This Permit Must Be Prominently Posted on Premises During Construction

APPLICANTTRACY WINTERS

PHONE386.623.4969

ADDRESS807SW BLAYLOCK COURT

LAKE CITYFL32024

OWNERROBERT KELLEY

PHONE352-949-1722

ADDRESS126SW JULBUG GLEN

FT. WHITEFL32038

CONTRACTORTRACY WINTERS

PHONE352.949.1722

LOCATION OF PROPERTY

47S,TR 27, TL RIVERSIDE,TL UTAH,TR WASHINGTON, TL SANTA FE,6/10 MILE TL JULBUG GLEN, 1ST DRIVE ON RIGHT.

TYPE DEVELOPMENTSFD/UTILITY

ESTIMATED COST OF CONSTRUCTION92400.00

HEATED FLOOR AREA836.00

TOTAL AREA1848.00

HEIGHT22.00

STORIES1

FOUNDATIONCONC

WALLSFRAMED

ROOF PITCH6'12

FLOORCONC

LAND USE & ZONINGESA-2

MAX. HEIGHT35

Minimum Set Back Requirments:

STREET-FRONT30.00

REAR25.00

SIDE25.00

NO. EX.D.U.0

FLOOD ZONEAE

DEVELOPMENT PERMIT NO.12-006

PARCEL ID26-6S-15-00821-000

SUBDIVISIONTHREE RIVERS ESTATES

LOT98

BLOCK

PHASE

UNIT10

TOTAL ACRES

CBC059798

Signature

Culvert Permit No.

Culvert Waiver

Contractor's License Number

Applicant/Owner/Contractor

EXISTING

12-445E

BLK

TC

N

Driveway Connection

Septic Tank Number

LU & Zoning checked by

Approved for Issuance

New Resident

COMMENTS: FLOODWAY, ELEVATION CERTIFICATE INCLUDING EQUIPMENT FINISHED

CONSTRUCTION. MFE @ 33.39'. INSPECTOR NEED TO CONFIRM 30' SETBACK

FROM SANTA FE DRIVE.

Check # or Cash1612✓

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 \$	465.00	CERTIFICATION FEE \$	9.24	SURCHARGE FEE \$	9.24		
MISC. FEES \$	0.00	ZONING CERT. FEE \$	50.00	FIRE FEE \$	0.00	WASTE FEE \$	
FLOOD DEVELOPMENT FEE \$	50.00	FLOOD ZONE FEE \$	25.00	CULVERT FEE \$		TOTAL FEE	608.48
INSPECTORS OFFICE	Signature	CLERKS OFFICE	Signature				

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

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

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

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



Barbaer  
Sign  
energy forms

TRUSSER

MANUEL DURAN, JR. - 100%  
Columbia County Building Permit Application

For Office Use Only Application # 12010-01 Date Received 10/2 By W Permit # 3053A  
Zoning Official BLK Date 12 Oct. 2012 Flood Zone AE Land Use ESA Zoning ESA-2  
FEMA Map # 0466C Elevation 33.39' MFE 34.39' River Santa Fe Plans Examiner T.C. Date 10-9-12  
Comments Floodway, Elevation Certificate including equipment finished construction  
☒ NOC ☒ EH ☐ Deed or PA ☐ Site Plan ☐ State Road Info ☒ Well letter ☐ 911 Sheet ☐ Parent Parcel #  
☒ Dev Permit # F-023-12-006 ☒ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter  
IMPACT FEES: EMS \_\_\_\_\_ Fire \_\_\_\_\_ Corr \_\_\_\_\_ ☒ Sub VF Form  
Road/Code \_\_\_\_\_ School \_\_\_\_\_ = TOTAL (Suspended) ☐ Ellisville Water ☒ App Fee Paid

Septic Permit No. 12-445-E Fax 904-312-0446

Name Authorized Person Signing Permit TRACY WINTERS Phone 623-4969

Address 807 SW Baylock Ct L.C. FL 32024

Owners Name ROBERT KELLEY, L.C. FL 32024 Phone 352-949-1722

911 Address 126 SW JOLBUG Glen, # WHITE FL 32038

Contractors Name TRACY WINTERS Phone 386-623-4969

Address 807 SW Baylock Ct L.C. FL 32024

Fee Simple Owner Name & Address \_\_\_\_\_

Bonding Co. Name & Address \_\_\_\_\_

Architect/Engineer Name & Address Will Meiers / MARK DISASWAY

Mortgage Lenders Name & Address CAPITOL CITY BANK P.O. Box 15469 Tallahassee FL 32317-5469

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

Property ID Number 26-65-15-00821-000 Estimated Cost of Construction \$9,000.00

Subdivision Name THREE RIVERS ESTATES Lot 98 Block \_\_\_\_\_ Unit 10 Phase \_\_\_\_\_

Driving Directions 475, TR27, TL RIVERSIDE, TL UTAH, TR WASHINGTON ST.

TL SANTA FE, 6/10 mile TL JOLBUG Glen, 1st Drive on Right.

Number of Existing Dwellings on Property 1

Construction of new single family dwelling Total Acreage \_\_\_\_\_ Lot Size \_\_\_\_\_

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 22

Actual Distance of Structure from Property Lines - Front 29 Side 175 Side 175 Rear 29

Number of Stories 1 Heated Floor Area 836 Total Floor Area 1848 SF 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 2010 and the 2008 National Electrical Code. Page 1 of 2 (Both Pages must be submitted together.) Revised 3-15-12

WJW Spoke  
w/ R. Kelley  
10-15-12  
10-26-12

Spoke to Tracy 10/12/12 - He will be faxing in the  
10-17-12 - Fax

\$608.48



**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. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

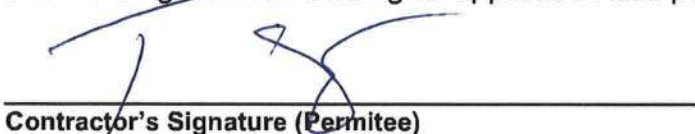
(Owners Must Sign All Applications Before Permit Issuance.)



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 (Permittee)

Contractor's License Number CAC 059798  
Columbia County  
Competency Card Number 549

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 2nd day of October 2012.

Personally known X or Produced Identification \_\_\_\_\_

  
State of Florida Notary Signature (For the Contractor)

SEAL:





30534

Rec'd  
12-26-12

Robert Kelley

126 SW Tolbug Cir

Ft. White

FD 23-12-006

## SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

CONTRACTOR

TRACY WINTERS

PHONE

386-623-4969

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.

<b>ELECTRICAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>MECHANICAL/ A/C</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>PLUMBING/ GAS 1330</b>	Print Name <u>Mario Spadaivecchia</u> License #: <u>CFC 1426551</u>	Signature <u>[Signature]</u> Phone #: <u>352-486-3509</u>
<b>ROOFING</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SHEET METAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>FIRE SYSTEM/ SPRINKLER</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SOLAR</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____

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

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

Contractor Form: Subcontractor Form: 6-09



FAX TO: LORI 758-2160  
12/26/12

Received  
12-26-12

p.1

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER F-623-12-006

CONTRACTOR TRACY WINTERS

PHONE 386-623-4969

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.

<b>ELECTRICAL</b> 309	Print Name: <u>Matt Burns Electric Inc.</u> License #: <u>ER13013004</u> Signature: <u>[Signature]</u> Phone #: <u>386 935 0444</u>
<b>MECHANICAL/A/C</b>	Print Name: <u>DAVID HALL</u> License #: <u>W19</u> Signature: <u>David Hall (owner)</u> Phone #: <u>755-9792</u>
<b>PLUMBING/GAS</b>	Print Name: _____ License #: _____ Signature: _____ Phone #: _____
<b>ROOFING</b>	Print Name: _____ License #: _____ Signature: _____ Phone #: _____
<b>SHEET METAL</b>	Print Name: _____ License #: _____ Signature: _____ Phone #: _____
<b>FIRE SYSTEM/SPRINKLER</b>	Print Name: _____ License #: _____ Signature: _____ Phone #: _____
<b>SOLAR</b>	Print Name: _____ License #: _____ Signature: _____ Phone #: _____

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

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

Contractor Form: Subcontractor Form 6/09

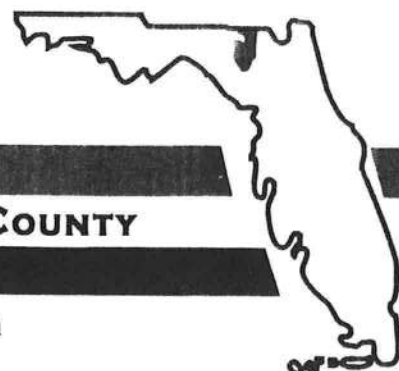
ROBERT KELLEY  
126 SW Tulbegh Ave  
Ft. White, FL 32038



District No. 1 - Ronald Williams  
District No. 2 - Rusty DePratter  
District No. 3 - Bucky Nash  
District No. 4 - Stephen E. Bailey  
District No. 5 - Scarlet P. Frisina



30534



## BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

### Memo of review for correctness and completion

In accordance with participation in the NFIP/CRS program, all elevation certificates are required to be reviewed for correctness and completion prior to acceptance by the community. This form shall be attached to all elevation certificates maintained on file and provided with requested copies of elevation certificates.

- \_\_\_\_\_ The attached certificate requires correction by the surveyor of section (s) \_\_\_\_\_ prior to acceptance by the community.
- ✓ \_\_\_\_\_ The attached elevation certificate is complete and correct.
- \_\_\_\_\_ Minor corrections have been made in the below marked section(s) by the authorized Community Official.

#### SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		Policy Number
City		Company NAIC Number
State		ZIP Code
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)		
A5. Latitude/Longitude: Lat. _____ Long. _____		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number _____		
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) _____ sq ft		a) Square footage of attached garage _____ sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq in		c) Total net area of flood openings in A9.b _____ sq in

#### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number		B2. County Name		B3. State	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input type="checkbox"/> No					

Comments: \_\_\_\_\_

Date of Review: 25 MARCH 2013

Community Official: B. J. [Signature]

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

BOARD MEETS FIRST THURSDAY AT 7:00 P.M.

AND THIRD THURSDAY AT 7:00 P.M.



# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

### FOR INSURANCE COMPANY USE

A1. Building Owner's Name **ROBERT PIERCE KELLY**

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
**126 SW JULEBUG GLEN**

Company NAIC Number:

City **FT. WHITE**

State **FL**

ZIP Code **32038**

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

**LOT 98, "THREE RIVERS ESTATES, UNIT 10", PLAT BOOK 6, PAGE 10. TAX PARCEL NO. 00-00-00-00821-000**

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **RESIDENTIAL**

A5. Latitude/Longitude: Lat. **N 29D55'58.3"**

Long. **W 082D46'55.2"**

Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number **5**

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) **NA** sq ft

b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade **NA**

c) Total net area of flood openings in A8.b **NA** sq in

d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:

a) Square footage of attached garage **NA** sq ft

b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade **NA**

c) Total net area of flood openings in A9.b **NA** sq in

d) Engineered flood openings? ☐ Yes ☒ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
**COLUMBIA COUNTY, FLORIDA 120070**

B2. County Name  
**COLUMBIA**

B3. State  
**FL**

B4. Map/Panel Number  
**12023C0466**

B5. Suffix  
**C**

B6. FIRM Index Date  
**01/06/1988**

B7. FIRM Panel Effective/  
Revised Date  
**02/04/2009**

B8. Flood Zone(s)  
**AE FW**

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
**33.6**

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:

☐ FIS Profile ☐ FIRM ☐ Community Determined ☒ Other/Source: **SUWANNEE RIVER WATER MANAGEMENT DISTRICT**

B11. Indicate elevation datum used for BFE in Item B9:

☐ NGVD 1929

☒ NAVD 1988

☐ Other/Source:

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?

☐ Yes ☒ No

Designation Date: / / ☐ CBRS ☐ OPA

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings\* ☐ Building Under Construction\* ☒ Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: **PRIVATE BM FROM USGS BM**

Vertical Datum: **NAVD 88 ADJUSTED FROM NGVD 29**

Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source:

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) **36 . 83**

☒ feet ☐ meters

b) Top of the next higher floor **NA**

☐ feet ☐ meters

c) Bottom of the lowest horizontal structural member (V Zones only) **NA**

☐ feet ☐ meters

d) Attached garage (top of slab) **NA**

☐ feet ☐ meters

e) Lowest elevation of machinery or equipment servicing the building  
(Describe type of equipment and location in Comments)

**35 . 2**

☒ feet ☐ meters

f) Lowest adjacent (finished) grade next to building (LAG) **25 . 6**

☒ feet ☐ meters

g) Highest adjacent (finished) grade next to building (HAG) **27 . 6**

☒ feet ☐ meters

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support **27 . 4**

☒ feet ☐ meters


## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION


This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

☐ Check here if comments are provided on back of form.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

☐ Check here if attachments.

Certifier's Name <b>MARK D. DUREN</b>	License Number <b>LS4708</b>
Title <b>FLORIDA LICENSED SURVEYOR AND MAPPER</b>	Company Name <b>MARK D. DUREN AND ASSOCIATES, INC.</b>
Address <b>1604 SW SISTERS WELCOME ROAD</b>	City <b>LAKE CITY</b>
State <b>FL</b>	ZIP Code <b>32025</b>
Signature 	Date <b>03/15/2013</b>
	Telephone <b>(386) 758-9831</b>

  
**LS4708**  
PLACE  
**3/15/2013**  
SEAL  
HERE  
**W13-056R.**



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 126 SW JULEBUG GLEN			Policy Number:
City FT. WHITE	State FL	ZIP Code 32038	Company NAIC Number:

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments LINE C2e IS A/C PLATFORM. BOTTOM OF ELECTRIC METER SOCKET IS EL. 32.65'. BOTTOM OF "ON DEMAND" HOT WATER HEATER IS EL. 30.55'. FRAME DWELLING ON WOOD PIERS WITH CONCRETE SLAB UNDERNEATH, NO ENCLOSURES. WOOD STEPS AND DECK. SLAB ELEVATION IS 27.75'+/-. AREA UNDER DWELLING APPEARS TO BE FOR STORAGE AND PARKING ONLY.

Signature



Date 03/15/2013

**SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).

a) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the LAG.

E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions),

the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.E3. Attached garage (top of slab) is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.**SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

☐ Check here if attachments.**SECTION G – COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.G3. ☐ The following information (Items G4–G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------	------------------------	---

G7. This permit has been issued for: ☐ New Construction ☐ Substantial ImprovementG8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments.



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>126 SW JULEBUG GLEN</b>			Policy Number:	
City <b>FT. WHITE</b>	State <b>FL</b>	ZIP Code <b>32038</b>	Company NAIC Number:	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

FRONT AND RIGHT SIDE VIEW (NORTH AND WEST) MARCH 1, 2013





<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>126 SW JULEBUG GLEN</b>			Policy Number:
City <b>FT. WHITE</b>	State <b>FL</b>	ZIP Code <b>32038</b>	Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

REAR AND RIGHT SIDE VIEW (SOUTH AND WEST) MARCH 1, 2013





*Handwritten:*  
P.D. Cason  
7/3/2012

*Handwritten:* P  
Inst: 201212010001 Date: 7/3/2012 Time: 11:45 AM  
DC: P. DeWitt Cason, Columbia County Page 1 of 2 B: 1237 P 1799

THIS INSTRUMENT PREPARED BY:

## CAPITAL CITY BANK

Post Office Box 15469, Tallahassee, Florida 32317-5469

Loan # 8928312170

Tax Folio #

### NOTICE OF COMMENCEMENT

STATE OF FLORIDA  
COUNTY OF ALACHUA

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the information is provided in this Notice of Commencement.

1. Description of property (legal description of property, and street address if available):

Lot 98 of THREE RIVER SE STATES UNIT NO. 10, according to the Plat thereof as recorded in Plat Book 6, Page(s) 10, of the Public Records of COLUMBIA County, Florida., a/k/a 126 SW Julbug Gln, Ft. White, FL 32308

2. General description of improvement: A single family dwelling

3. Owner information:

a) Name and address:  
Robert Kelly Jr.  
126 SW Julbug Gln.  
Ft. White, FL 32038

b) Interest in property: Fee simple

c) Name and address of fee simple titleholder (other than owner):

4. Contractor (name and address):

Winters Construction Group  
PO Box 3652  
Lake City, FL 32056

5. Surety

a) Name and address:

b) Amount of bond: \$ \_\_\_\_\_

6. Lender (name and address): Capital City Bank, P.O. Box 15469, Tallahassee, FL 32317

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)(7), Florida Statutes (name and address):

8. In addition to himself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes (name and address):

Capital City Bank, P.O. Box 15469, Tallahassee, FL 32317

9. Expiration date of Notice of Commencement (the expiration date is two years from the date of recording unless a different date is specified):

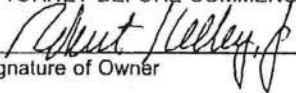


STATE OF FLORIDA, COUNTY OF COLUMBIA  
I HEREBY CERTIFY, that the above and foregoing  
is a true copy of the original filed in this office.  
P. DEWITT CASON, CLERK OF COURTS

By: *Bonnie Dow*  
Deputy Clerk

Date: *July 3, 2012*

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPOPER PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.13, FLORIDA STATUTES AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.



Signature of Owner

ROBERT KELLEY, JR.

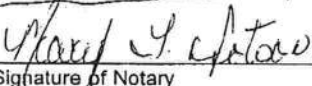
Owner's name (printed)

Signature of Owner

Owner's name (printed)

Address of Owner

Sworn to and subscribed before me by Robert Kelley, Jr., who is personally known to me or produced a driver's license as identification, and who did/did not take an oath, this 27<sup>th</sup> day of June, 2012.

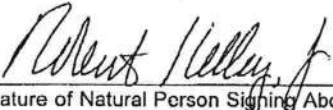


Signature of Notary



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.



Signature of Natural Person Signing Above



THIS INSTRUMENT PREPARED BY:

Inst 201212010001 Date 7/3/2012 Time 11:45 AM  
DC, P. DeWitt Cason, Columbia County Page 1 of 2 B: 1237 P 1799

## CAPITAL CITY BANK

Post Office Box 15469, Tallahassee, Florida 32317-5469

Loan # 8928312170

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- c) Name and address of fee simple titleholder (other than owner):

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Winters Construction Group  
PO Box 3652  
Lake City, FL 32056

5. Surety

- a) Name and address:

- b) Amount of bond: \$ \_\_\_\_\_

6. Lender (name and address): Capital City Bank, P.O. Box 15469, Tallahassee, FL 32317

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)(7), Florida Statutes (name and address):

8. In addition to himself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes (name and address):

Capital City Bank, P.O. Box 15469, Tallahassee, FL 32317

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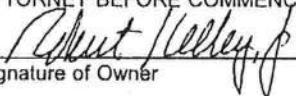


STATE OF FLORIDA, COUNTY OF COLUMBIA  
I HEREBY CERTIFY that the above and foregoing  
is a true copy of the original filed in this office.  
P. DEWITT CASON, CLERK OF COURTS

By: Bonnie Dow  
Deputy Clerk

Date: July 3, 2012

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPOPER PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.13, FLORIDA STATUTES AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.



Signature of Owner

ROBERT KELLEY, JR.

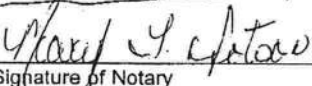
Owner's name (printed)

Signature of Owner

Owner's name (printed)

Address of Owner

Sworn to and subscribed before me by Robert Kelley, Jr., who is personally known to me or produced a driver's license as identification, and who did/did not take an oath, this 27<sup>th</sup> day of June, 2012.



Signature of Notary



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.



Signature of Natural Person Signing Above



# Columbia County Property Appraiser

CAMA updated: 8/2/2012

**2011 Tax Year**

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

Parcel: 00-00-00-00821-000

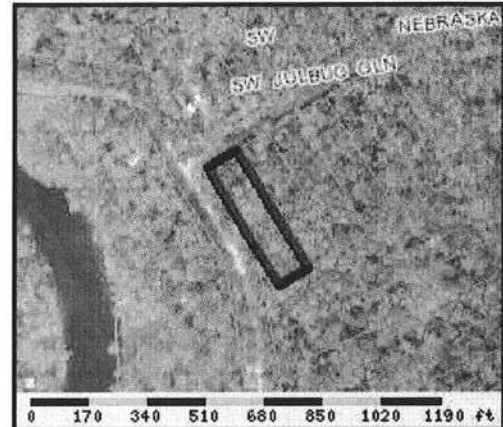
&lt;&lt; Next Lower Parcel

Next Higher Parcel &gt;&gt;

Search Result: 1 of 1

## Owner & Property Info

<b>Owner's Name</b>	KELLEY ROBERT JR		
<b>Mailing Address</b>	7817 SW 161 ST AVE ARCHER, FL 32618		
<b>Site Address</b>	126 SW JULBUG GLN		
<b>Use Desc. (code)</b>	VACANT (000000)		
<b>Tax District</b>	3 (County)	<b>Neighborhood</b>	100000
<b>Land Area</b>	0.000 ACRES	<b>Market Area</b>	02
<b>Description</b>	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.  LOT 98 UNIT 10 THREE RIVERS ESTATES. ORB 832-844, 832-845, WD 1032-2440, WD 1040-2807. WD 1109-1298, QC 1235-956 SWD 1237-1779		



## Property & Assessment Values

2011 Certified Values		
<b>Mkt Land Value</b>	cnt: (0)	\$10,000.00
<b>Ag Land Value</b>	cnt: (2)	\$0.00
<b>Building Value</b>	cnt: (0)	\$0.00
<b>XFOB Value</b>	cnt: (0)	\$0.00
<b>Total Appraised Value</b>		\$10,000.00
<b>Just Value</b>		\$10,000.00
<b>Class Value</b>		\$0.00
<b>Assessed Value</b>		\$10,000.00
<b>Exempt Value</b>		\$0.00
<b>Total Taxable Value</b>	Cnty: \$10,000 Other: \$10,000   Schl: \$10,000	

## 2012 Working Values

### NOTE:

2012 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

[Show Working Values](#)

## Sales History

[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
6/19/2012	1237/1779	WD	V	U	30	\$100.00
5/14/2012	1235/956	QC	V	U	11	\$100.00
1/26/2007	1109/1298	WD	V	U	08	\$18,500.00
3/14/2005	1040/2807	WD	V	U	08	\$10,000.00
11/17/2004	1032/2440	WD	V	Q		\$58,400.00
12/9/1996	832/845	WD	V	Q		\$1,800.00

## Building Characteristics

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

## Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

## 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: 3/27/2007 DATE ISSUED: 3/29/2007

#### ENHANCED 9-1-1 ADDRESS:

126 SW JULBUG GLN

FORT WHITE FL 32038

#### PROPERTY APPRAISER PARCEL NUMBER:

00-00-00-00821-000

#### Remarks:

LOT 98 UNIT 10 THREE RIVERS ESTATES

Address Issued By: SIGNED: / RONAL N. CROFT  
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.**

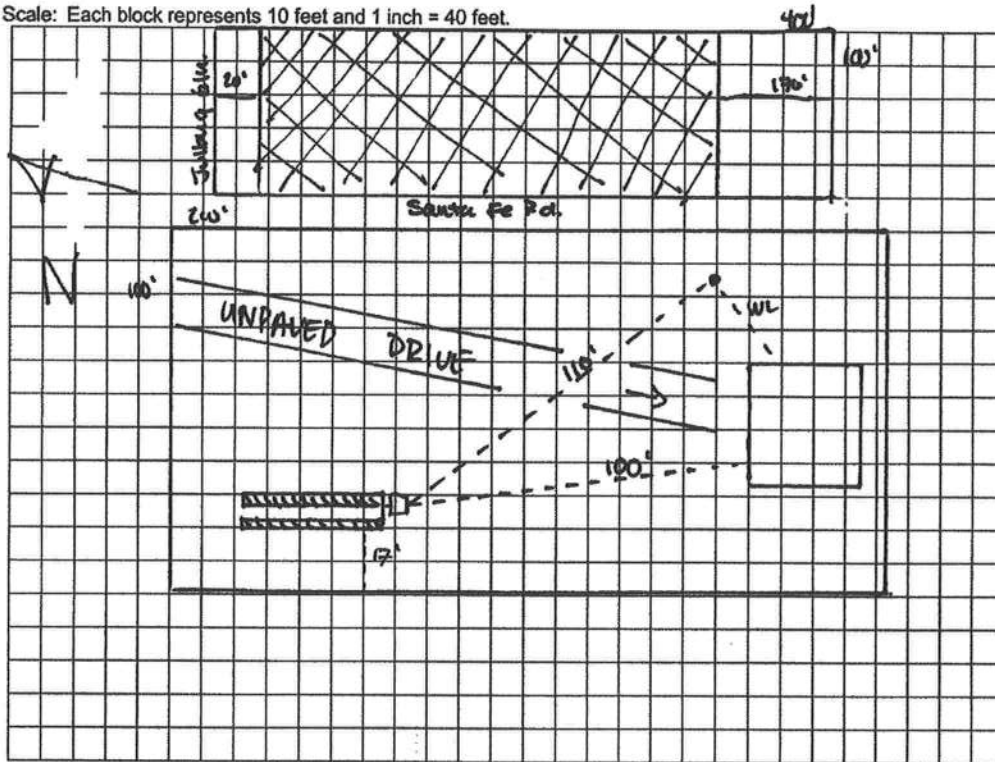


STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 12-445E

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

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

Notes: NO well or septic within lot or system.

Site Plan submitted by: \_\_\_\_\_

Plan Approved X

Not Approved \_\_\_\_\_

Date 10/11/12

By \_\_\_\_\_

Columbo

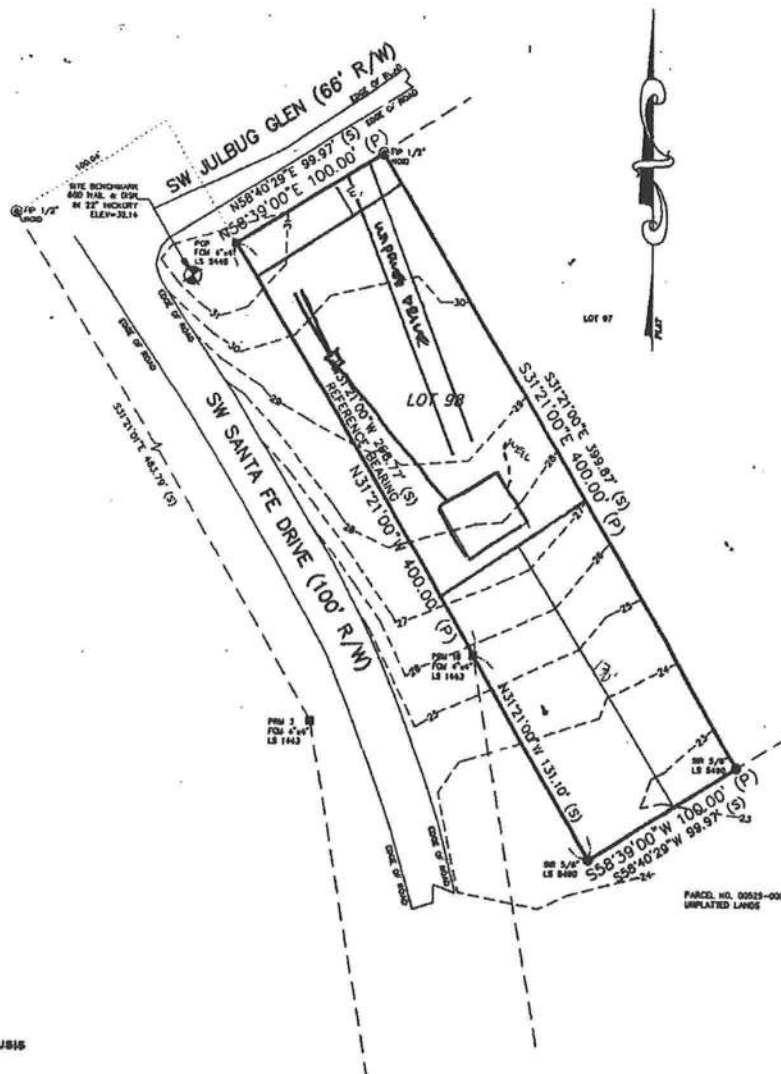
County Health Department

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**DH-4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC  
(Stock Number: 5744-002-4015-6)

Page 2 of 4

# MAP OF BOUNDARY SURVEY

SHOWING LOT 98, THREE RIVERS ESTATES, UNIT 10, ACCORDING TO THE MAP OR PLAT THEREOF AS RECORDED IN PLAT BOOK , PAGE 10, OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA.



TO:  
VILLACRUSIS  
1000  
JOB  
30  
TITLE SERVICES of LAKE CITY  
ATIONAL TITLE INSURANCE CO.

BY THIS SURVEY WAS DONE UNDER MY DIRECT  
AND IT MEETS THE MINIMUM TECHNICAL STANDARDS  
REQUIRE PURSUANT TO CHAPTER 61017-5, FLORIDA  
CODE, CHAPTER 472, FLORIDA STATUTES.

OPEN PSN 5491

*William N. Kitchen*  
12-1-2006

- SURVEYOR'S NOTES**
1. BEARING BASED ON PLAT.
  2. THIS SURVEY BASED ON LEGAL DESCRIPTION FURNISHED. THE PUBLIC RECORDS, WERE NOT SEARCHED BY THIS SURVEYOR FOR EASEMENTS, TITLE COVENANTS, RESTRICTIONS, CLOSURES, TACKINGS OR ORDINANCES, ETC., THERE COULD BE OTHER MATTER OF RECORD THAT EFFECT THIS PARCEL.
  3. UNDERGROUND UTILITIES ARE NOT LOCATED BY THIS SURVEY.
  4. SUBJECT PROPERTY SHOWN HEREON LIES IN FLOOD "A" AS BEST DETERMINED BY F.E.M.A. PANEL # 1 200 700 255 B, DATED: JANUARY 8, 1988.
  5. SUBJECT PROPERTY SHOWN HEREON LIES IN RIVER MILE 46 FOR SUNNAMED RIVER MANAGEMENT DISTRICT; 100-YEAR FLOOD = 34 FEET; 10-YEAR FLOOD = 31 FEET; 2-YEAR FLOOD = 23 FEET.
  6. SUBJECT PROPERTY AND OR OTHER "MENTAL SENSITIVE" AREAS IF ANY, NOT LOCATED BY THIS SURVEY.

ABOUT THE SIGNATURE AND THE ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER.

WILLIAM N. KITCHEN  
JUNIOR SURVEYOR AND MAPPER  
52 N MARION AVENUE  
LAKE CITY, FLORIDA 32055  
PHONE (386) 755-7786

LIE, WILBUR & ALLEN WOOD &  
EAZAR C. VILLACRUSIS

DRAWN BY: RI FIELD BOOK: 06596

SCALE: 1" = 60'

SURVEY DATE: NOVEMBER 22, 2006

JOB NUMBER

06596

SHEET

1 OF 1

## LEGEND

(P) = PLAT  
(S) = SURVEY MEASUREMENT  
HOD = NO SURVEYORS IDENTIFICATION  
LS = LAND SURVEYOR  
LB = LICENSE BUSINESS  
FIR = FOUND IRON ROD  
FIP = FOUND IRON PIPE  
FCM = FOUND CONCRETE MONUMENT  
SIR = SET IRON ROD  
PCP = PERMANENT CONTROL POINT  
PRM = PERMANENT REFERENCE MONUMENT  
S.T. = SEPTIC TANK  
R/W = RIGHT OF WAY





STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
ON-SITE SEWAGE TREATMENT AND DISPOSAL  
SYSTEM  
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 12-0445E  
DATE PAID: 10/5/12  
FEE PAID: 125.00  
RECEIPT #: 2082024  
APP# 1083188

## APPLICATION FOR:

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

APPLICANT: ROBERT PIERCE KELLEY, JRAGENT: N/ATELEPHONE: 386-497-5144MAILING ADDRESS: 126 SW Julbug Glen, Ft. WHITE, FL 32038

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

## PROPERTY INFORMATION

LOT: 98 UNIT BLOCK: 10 SUBDIVISION: THREE RIVERS ESTATES PLATTED: YES

PROPERTY ID #: R 000821-000 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: (Y<sup>N</sup>)

PROPERTY SIZE: .92 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? (Y<sup>N</sup>) DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: 126 SW Julbug Glen, Ft. WHITE, FL 32038

DIRECTIONS TO PROPERTY: TAKE 27 WEST FROM Ft WHITE APPROX 8 miles - JUST BEFORE Itchetucknee River turn LEFT (SOUTH) INTO THREE RIVERS ESTATES. MAKE 1ST LEFT ON UTAH, then 1st right on WASHINGTON; Go approx 1 mile take left on SANTA FE DRIVE. Go 1/10 of a mile - LEFT on JULBUG - right into driveway

## BUILDING INFORMATION

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	House	2	820	Held for 2nd level Rev.
2				meeting 10/10/12
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_

SIGNATURE: Robert P. KelleyDATE: 10/5/12

DH 4015, 08/09 (Obsoletes previous editions which may not be used)  
Incorporated 64E-6.001, FAC

August 15, 2012

Vince Robinson  
Suwannee River Water Management District  
9225 CR 49  
Live Oak, FL 32060

**SUBJECT: Zero Rise – Robert Kelley**

Mr. Robinson,

Mr. Kelley proposes to build a home and a shed in Section 26, Township 6 South, Range 15 East, Columbia County, FL. The structure will be a +/- 20' x 50' site built home and a +/- 12' x 16' shed in the floodway of the Santa Fe River.

Zero rise calculations for the proposed structure were performed with HEC-RAS 4.0 using the HEC-RAS model for the Lower Suwannee River System that was last updated in August 2005 by Dewberry and Davis LLC.

The following steps were executed in the doing the zero rise calculations.

- 1) Interpolate between existing cross sections and add new cross sections at the site location at the location of the proposed building(s).

**Between river station/mile 7.64 and river station/mile 8.43, the new cross section was interpolated at river station/mile 8.28. The elevations from the interpolated cross sections were adjusted accordingly.**

- 2) Add obstacles along the new cross sections to model the piers under the house.

**An obstacle width of 60 feet was added at the cross section at river station/mile 8.28. An obstacle with a top elevation at 40.00 ft was input to insure the structure would be modeled correctly.**

- 3) Verify that the profile using the obstacles matches the profile using the additional cross sections (without obstacles) and the original model profile within 0.01 feet.

**The water surface elevations for all three scenarios match and a zero rise is achieved.**



A site plan locating the property on the flood map is included in this package. Model cross sections and water surface elevations for each scenario are also included in this package.

Sincerely,

A handwritten signature in blue ink that reads "David M. Winsberg". The signature is written in a cursive style with a large, stylized "W".

David M. Winsberg, PE  
Civil Engineer

## Zero Rise Certification

Client/Owner: Robert Kelley

Property Description: ~0.82 Acres in  
Section 26, Township 6 South, Range 15 East  
Columbia County, FL

Structure in Floodway: Single Family Dwelling

River Station/Mile: 8.28

Elevation of 100 yr flood: 33.39 NAVD88

Flood Map for Property: 12023C 0466C

I hereby certify that construction of the proposed residence and shed will not increase any flood elevations in the Lower Suwannee River System.



David M. Winsberg  
PE License # 68463  
Cert. Auth. # 29596

Winsberg, Inc.  
PO Box 2815  
Lake City, FL 32056  
Phone (386) 755-7449  
Fax (888) 522-0030  
david@winsberginc.com

SRWMD PERMIT NUMBER

APPLICATION FOR  
GENERAL WORK OF THE DISTRICT  
DEVELOPMENT PERMIT  
FORM 40B-1.901(11)  
(Page 1)

General Instructions: Please provide complete information for the items on this application. Applicants should consult the listing of information and the conditions for use of a general permit on the opposite side of this application. For a general permit to be valid, all of the specific information required on this application must be supplied; and the proposed development must meet the conditions listed on the reverse side of this application. To determine if a proposed development qualifies for a general permit, answer questions 1 through 7 on the opposite side of this application.

Please check one:

APPLICATION FOR:

- ( X ) NEW WORK OF THE DISTRICT DEVELOPMENT PERMIT  
( ) MODIFICATION TO EXISTING PERMIT  
(EXISTING PERMIT NUMBER \_\_\_\_\_)

Owner of the land on which the development will occur:

NAME: Robert Kelley Jr

ADDRESS: 7817 SW 161 St Ave Archer FL 32618  
Street or Route City State Zip

TELEPHONE: Home ( ) \_\_\_\_\_ (or) Work ( ) \_\_\_\_\_ FAX: \_\_\_\_\_

General Development Information:

PROJECT LOCATION: \_\_\_\_\_ Columbia 26 6 South 15 East  
City County Section/Township/Range

PROJECT NAME: \_\_\_\_\_ PARCEL NO.: \_\_\_\_\_

SEPTIC TANK PERMIT NUMBER (if applicable): \_\_\_\_\_ DATE ISSUED: \_\_\_\_\_

PROJECT SIZE:

Total contiguous land area owned or controlled \_\_\_\_\_ (acres)

Total project area (if different than total land area) \_\_\_\_\_ (acres)

GENERAL DESCRIPTION OF THE PROPOSED DEVELOPMENT: Construct a site built home

ANTICIPATED BEGINNING DATE: \_\_\_\_\_ ANTICIPATED COMPLETION DATE: \_\_\_\_\_

In order for a general permit to be valid, copies of the following items must be attached to this application:

1. A copy of the appropriate city or county development permit including copies of any engineer or surveyor certifications required by the city or county (if applicable).
2. A copy of the Florida Department of Health Onsite Sewage Disposal Permit (Septic Tank Permit).
3. A site development plan, signed and sealed by a Registered Surveyor, that meets the minimum technical standards as set forth by the Florida Board of Professional Land Surveyors in Chapter 61G17-6, Florida Administrative Code (F.A.C.).

A General Works of the District Development Permit is authorized by rule 40B-4.3010(1), F.A.C., and requires permittees to comply with all limiting conditions listed on the reverse side of this application (rule 40B-4.3030, F.A.C.). Submission of this application and subsequent development under the provisions of the general permit constitutes agreement by the permittee to abide by these conditions. Failure to abide by these conditions may constitute a violation of District rules and result in District enforcement action. There is a \$250 fee for a general permit. A copy of chapter 40B-4, F.A.C., is available at no charge from the District and is available on our website [www.srwmd.state.fl.us](http://www.srwmd.state.fl.us); or questions may be directed to the District at 904.362.1001 or 800.226.1066, toll free, Florida only.

Signature of the OWNER of the property on which the development will occur. \_\_\_\_\_ Date \_\_\_\_\_



FORM 40B-1.901(11)  
(PAGE 2)

CONDITIONS FOR ISSUANCE OF A GENERAL WORKS OF THE DISTRICT DEVELOPMENT PERMIT

Rule 40B-4.3030, Florida Administrative Code, states in part:

"the district will not approve the issuance of a works of the district development permit for any work, structures, road, or other facilities which have the potential of individually or cumulatively reducing floodway conveyance or increasing water-surface elevations above the 100-year flood elevation, or increasing soil erosion" [see 40B-4.3030(2)].

The rules go on to list a series of criteria (or conditions) for development which if met will result in issuance of District permit(s) for the development [see ss.40B-4.3030(2)(a) – (d) and ss.(4)(a) – (d)]. Certain of these conditions are applicable to the type of development that a general permit is intended to cover, namely construction of structures for single-family residential or agricultural use, including necessary land leveling, and construction of associated water supply, wastewater disposal, and private driveways. The conditions which apply are:

-Buildings in the floodway are elevated on piles without the use of fill such that the lowest structural member of the first floor of the building is at an elevation at least one foot above the 100-year flood elevation.

-The area below the first floor of elevated buildings is left clear and unobstructed except for the piles or stairways.

-A permanent elevation monument is established on the property to be developed by a surveyor. The monument shall be adequate to establish land surface and minimum buildup elevations to the nearest 1/100 of a foot.

-No permanent fill or other obstructions are to be placed above the natural grade of the ground.

-No activities are proposed which would result in the filling or conversion of wetlands.

-Clearing of land shall be limited to that necessary to remove diseased vegetation, construct structures, associated water supply, wastewater disposal, and private driveway access facilities; and no construction shall occur in the front 75 feet of an area immediately adjacent to a water. Clearing of vegetation within the front 75 feet immediately adjacent to a water shall be limited to that necessary to gain access or remove diseased vegetation [see ss.40B-4.3030(2)(b) – (d) and ss.(4)(a) and (b)].

To determine if your proposed development qualifies for a General Works of the District development permit, answer the following questions with "YES" or "NO":

1. Yes Are you planning to develop a single-family residential (private home including mobile homes, vacation homes, etc.) or an agricultural structure or are you planning to add improvements including wells, septic tanks, driveways, or an addition to such a structure?

2. Yes Will the structure described above be elevated at least one (1) foot above the 100-year flood level on piles and without any above-grade fill? NOTE: Fill material placed at (not above) the grade of the ground, including concrete slabs, is allowed.

3. Yes Will the area below the first floor of the structure described above be left clear and unobstructed with the exception of the piles or a stairway? NOTE: Solid walls below the elevated first floor are not allowed under a general permit; however, screen, lattice work, or open fencing enclosures which will not obstruct flood flows are allowed if approved by the District.

4. Yes Has (or will) a surveyor established a permanent elevation monument on your property for the purpose of establishing land elevations and minimum buildup elevations?

5. Yes Will all associated facilities, such as septic tanks, wells, driveways, etc., be constructed with no fill material placed above the grade of the natural ground? NOTE: Excavation of unsuitable soils for driveways or foundations and replacement with suitable material is allowed if the materials excavated are transported out of the floodway and the replacement material is placed at (not above) the grade of the natural ground.

6. Yes Will all components of the development be located such that no portion of the development will occur in a wetland area (muck or "wet" soils, swampy cypress, or hardwood areas)?

7. No Are you planning to build a dock, boat ramp, etc.? (ERP, SSL, ACOE).

8. Yes Will all components of the development be located at least 75 feet from the normal top of bank of the river and will any clearing in the front 75 feet be limited to removing diseased vegetation or creating access?

If you have answered "YES" to all of the questions above, your proposed development may qualify for a General Works of the District development permit. Complete the application on the front side of the form, attach the necessary information, and mail or deliver the application to the District. If you answered "NO" to one or more of the questions, your development probably does not qualify for a general permit. Please contact the District for further instructions.

# Columbia County Property Appraiser

DB Last Updated: 11/15/2011

2011 Tax Year

Parcel: 00-00-00-00821-000

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

<< Next Lower Parcel

Next Higher Parcel >>

Interactive GIS Map

Print

## Owner & Property Info

Search Result: 1 of 1

Owner's Name	KELLEY ROBERT JR &		
Mailing Address	SUSAN PUNDT 7817 SW 161 ST AVE ARCHER, FL 32618		
Site Address	126 SW JULBUG GLN		
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	100000
Land Area	0.000 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 98 UNIT 10 THREE RIVERS ESTATES. ORB 832-844, 832-845, WD 1032-2440, WD 1040-2807. WD 1109-1298,			



## Property & Assessment Values

2011 Certified Values		
Mkt Land Value	cnt: (0)	\$10,000.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$10,000.00
Just Value		\$10,000.00
Class Value		\$0.00
Assessed Value		\$10,000.00
Exempt Value		\$0.00
Total Taxable Value		Cnty: \$10,000 Other: \$10,000   Schl: \$10,000

## 2012 Working Values

### NOTE:

2012 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

## Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
1/26/2007	1109/1298	WD	V	U	08	\$18,500.00
3/14/2005	1040/2807	WD	V	U	08	\$10,000.00
11/17/2004	1032/2440	WD	V	Q		\$58,400.00
12/9/1996	832/845	WD	V	Q		\$1,800.00

## Building Characteristics

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

## Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

## Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000000	VAC RES (MKT)	1 LT - (00000000.000AC)	1.00/1.00/1.00/1.00	\$7,200.00	\$7,200.00
009945	WELL/SEPT (MKT)	1 UT - (00000000.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00

Columbia County Property Appraiser

DB Last Updated: 11/15/2011

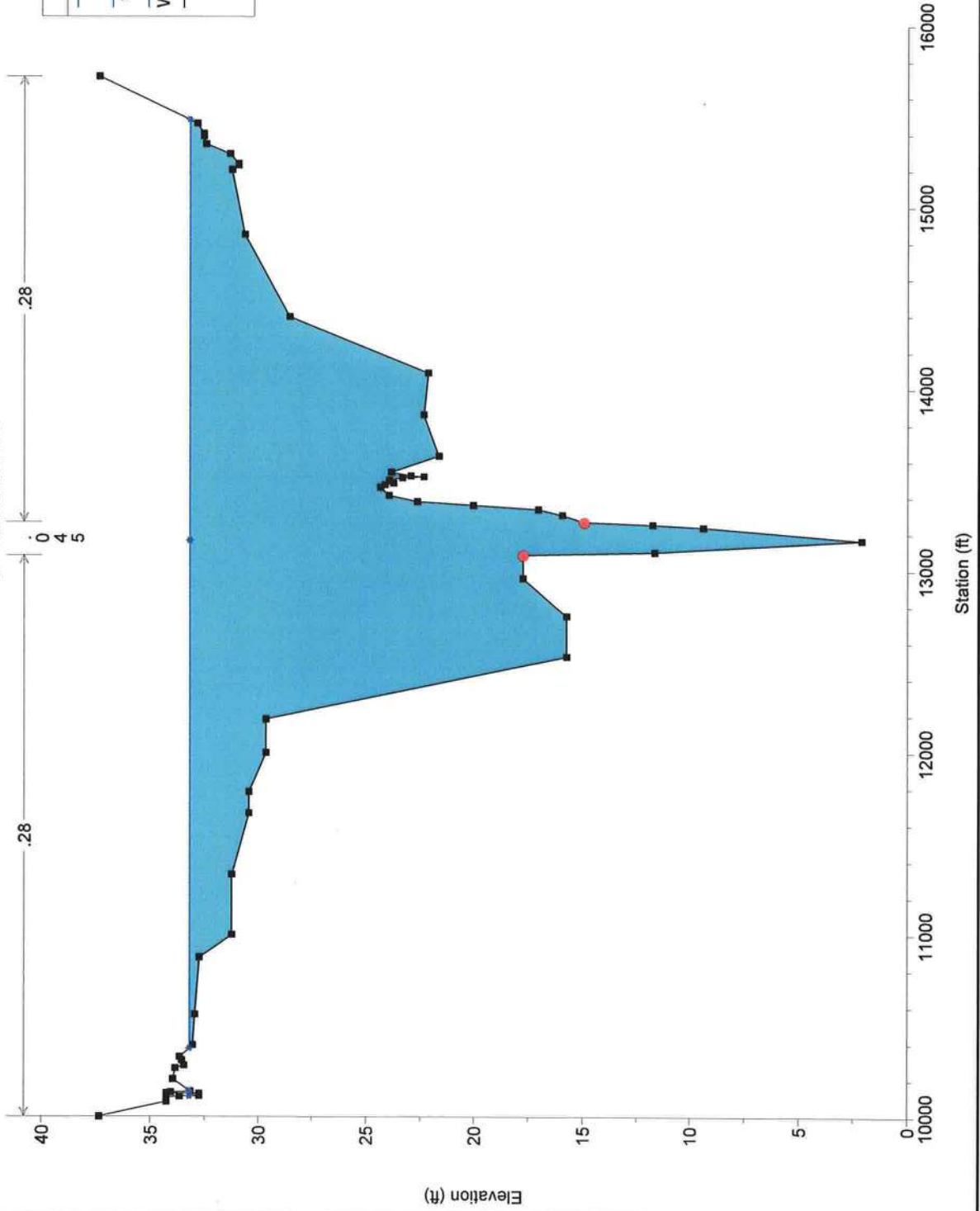
## DISCLAIMER

This information was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or



Suwannee River and SantaFe River Plan: 1) Original 11/21/2011 2) Extra XS 11/21/2011 3) Developed 11/21/2011

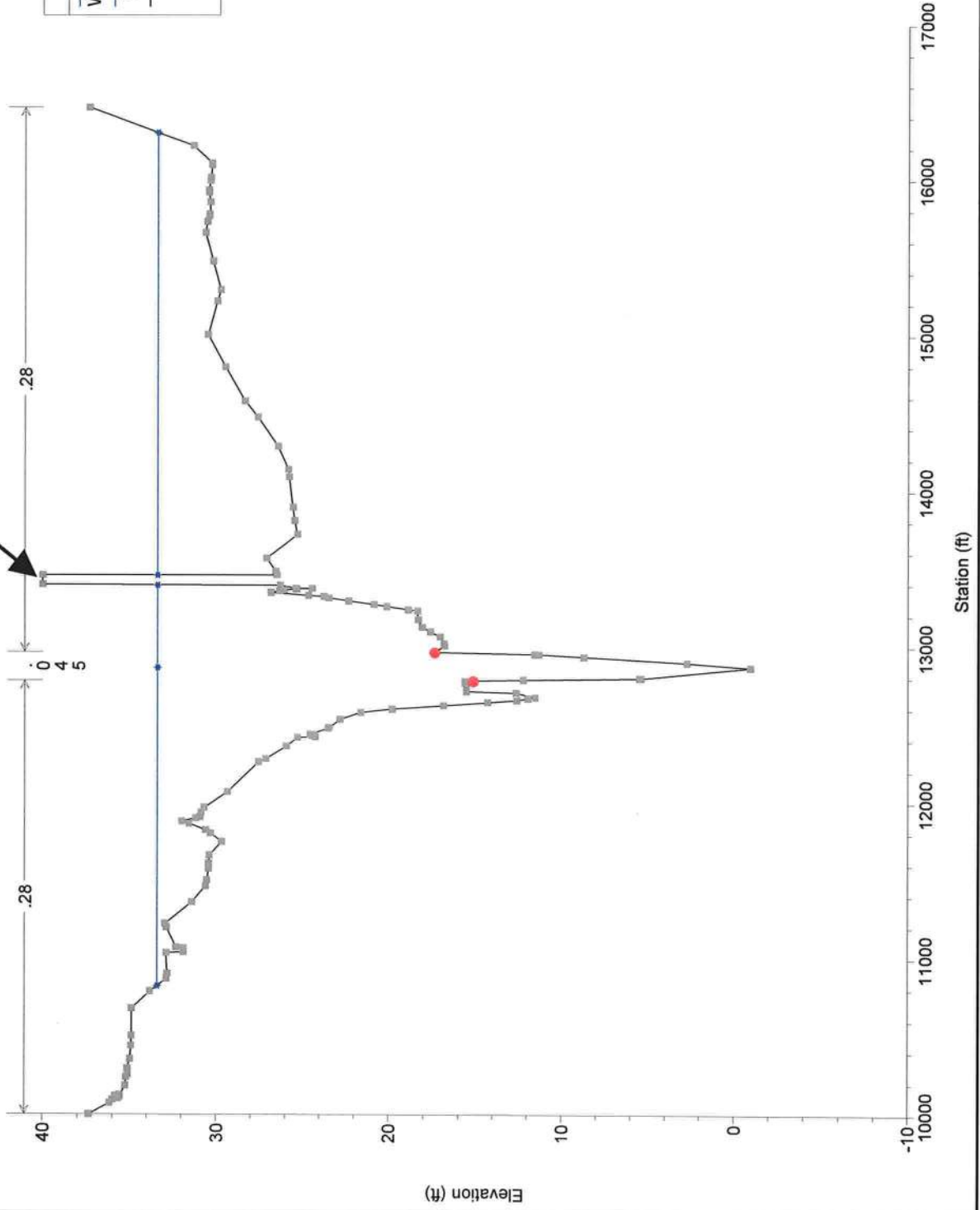
F - GILCHRIST FIS -





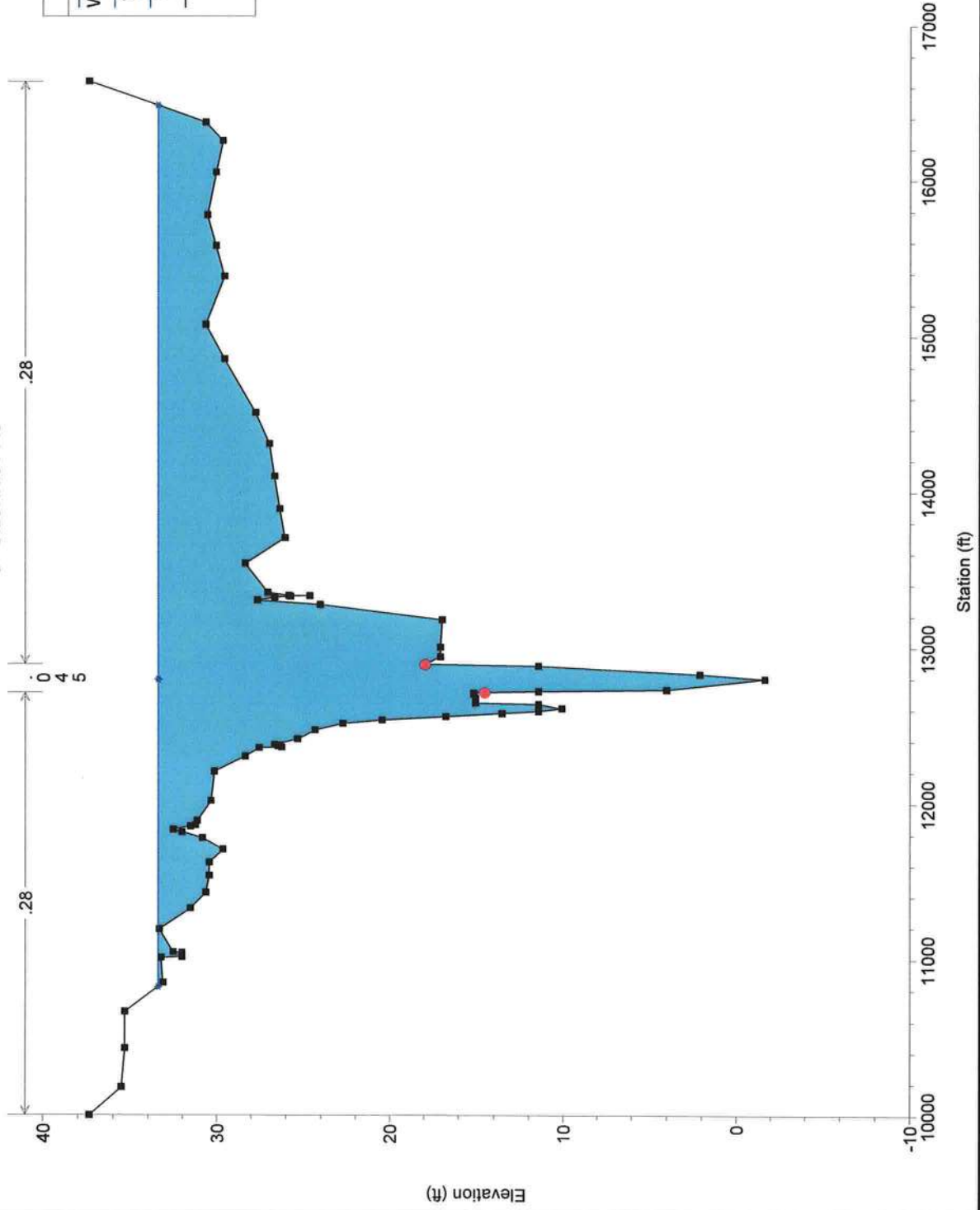
Development modeled  
as an obstruction

Suwannee River and SantaFe River Plan: 1) Original 11/21/2011 2) Extra XS 11/21/2011 3) Developed 11/21/2011



Suwannee River and SantaFe River Plan: 1) Original 11/21/2011 2) Extra XS 11/21/2011 3) Developed 11/21/2011

G - GILCHRIST FIS -



HEC-RAS Locations: User Defined Profile: 100 Year

River	Reach	River Sta	Profile	Plan	Q Total (cfs)	Min Ch El (ft)	W.S. Elev (ft)	Crit W.S. (ft)	E.G. Elev (ft)	E.G. Slope (ft/ft)	Vel Chnl (ft/s)	Flow Area (sq ft)	Top Width (ft)	Froude # Chl
Santa Fe	Main	11.3	100 Year	Original	16359.00	6.34	34.23		34.26	0.000035	1.70	32793.08	2491.62	0.06
Santa Fe	Main	11.3	100 Year	Extra XS	16359.00	6.34	34.23		34.27	0.000035	1.70	32798.86	2491.85	0.06
Santa Fe	Main	11.3	100 Year	Developed	16359.00	6.34	34.24		34.27	0.000035	1.70	32801.34	2491.95	0.06
Santa Fe	Main	10.06	100 Year	Original	16359.00	1.15	33.89		33.96	0.000068	2.39	21181.37	2550.87	0.08
Santa Fe	Main	10.06	100 Year	Extra XS	16359.00	1.15	33.90		33.97	0.000068	2.39	21187.63	2551.29	0.08
Santa Fe	Main	10.06	100 Year	Developed	16359.00	1.15	33.90		33.97	0.000068	2.39	21190.31	2551.47	0.08
Santa Fe	Main	8.43	100 Year	Original	16359.00	-1.66	33.43		33.49	0.000052	2.21	34646.78	5661.30	0.07
Santa Fe	Main	8.43	100 Year	Extra XS	16359.00	-1.66	33.44		33.49	0.000052	2.21	34662.07	5661.63	0.07
Santa Fe	Main	8.43	100 Year	Developed	16359.00	-1.66	33.44		33.49	0.000052	2.21	34668.62	5661.77	0.07
Santa Fe	Main	8.28*	100 Year	Extra XS	16359.00	-0.95	33.39		33.45	0.000055	2.24	34689.93	5476.91	0.07
Santa Fe	Main	8.28*	100 Year	Developed	16359.00	-0.95	33.39		33.45	0.000056	2.25	34241.95	5414.16	0.07
Santa Fe	Main	7.64	100 Year	Original	16359.00	2.09	33.21		33.26	0.000062	2.22	35466.75	5127.96	0.08
Santa Fe	Main	7.64	100 Year	Extra XS	16359.00	2.09	33.21		33.26	0.000062	2.22	35466.75	5127.96	0.08
Santa Fe	Main	7.64	100 Year	Developed	16359.00	2.09	33.21		33.26	0.000062	2.22	35466.75	5127.96	0.08
Santa Fe	Main	6.46	100 Year	Original	16359.00	1.87	32.94		32.98	0.000039	1.81	37576.35	3849.49	0.06
Santa Fe	Main	6.46	100 Year	Extra XS	16359.00	1.87	32.94		32.98	0.000039	1.81	37576.35	3849.49	0.06
Santa Fe	Main	6.46	100 Year	Developed	16359.00	1.87	32.94		32.98	0.000039	1.81	37576.35	3849.49	0.06



FLOODING SOURCE		FLOODWAY			BASE FLOOD WATER-SURFACE ELEVATION (FEET NGVD)			
CROSS SECTION	DISTANCE	WIDTH (FEET)	SECTION AREA (SQUARE FEET)	MEAN VELOCITY (FEET PER SECOND)	REGULATORY	WITHOUT FLOODWAY	WITH FLOODWAY	INCREASE
Rose Creek (continued)	20,750 <sup>1</sup>	274	2,037	1.5	84.7	84.7	85.7	1.0
	21,179 <sup>1</sup>	158	1,283	2.3	85.2	85.2	86.1	0.9
	21,397 <sup>1</sup>	158	1,538	1.9	88.2	88.2	88.9	0.7
	21,896 <sup>1</sup>	159	1,670	1.8	88.2	88.2	89.0	0.8
Santa Fe River	7,64 <sup>2</sup>	1,694/728 <sup>3</sup>	23,965	0.7	33.8	33.8	34.8	1.0
	8,43 <sup>2</sup>	2,099/1,260 <sup>3</sup>	25,132	0.7	34.0	34.0	35.0	1.0
	10,06 <sup>2</sup>	1,217/550 <sup>3</sup>	17,908	0.9	34.5	34.5	35.5	1.0
	11,30 <sup>2</sup>	1,615/604 <sup>3</sup>	28,519	0.6	34.8	34.8	35.8	1.0
	13,03 <sup>2</sup>	1,832/864 <sup>3</sup>	28,188	0.6	35.2	35.2	36.2	1.0
	14,08 <sup>2</sup>	1,883/642 <sup>3</sup>	25,502	0.6	35.5	35.5	36.5	1.0
	15,08 <sup>2</sup>	1,643/361 <sup>3</sup>	22,407	0.7	35.9	35.9	36.8	0.9
	16,53 <sup>2</sup>	1,668/965 <sup>3</sup>	23,330	0.7	36.6	36.6	37.5	0.9
	17,78 <sup>2</sup>	1,615/1,122 <sup>3</sup>	21,455	0.8	37.2	37.2	38.2	1.0
	18,49 <sup>2</sup>	1,587/1,179 <sup>3</sup>	18,323	0.9	37.6	37.6	38.6	1.0
	19,62 <sup>2</sup>	1,224/323 <sup>3</sup>	18,240	0.9	38.2	38.2	39.2	1.0
	20,44 <sup>2</sup>	1,368/302 <sup>3</sup>	19,267	1.0	38.6	38.6	39.6	1.0
	21,59 <sup>2</sup>	541/367 <sup>3</sup>	7,946	2.5	39.6	39.6	40.5	0.9
	22,24 <sup>2</sup>	524/348 <sup>3</sup>	6,489	3.0	40.6	40.6	41.5	0.9
	23,14 <sup>2</sup>	741/639 <sup>3</sup>	7,772	2.5	42.0	42.0	42.9	0.9
	23,82 <sup>2</sup>	491/172 <sup>3</sup>	7,448	2.6	43.4	43.4	44.4	1.0
	24,15 <sup>2</sup>	539/195 <sup>3</sup>	5,980	3.3	43.8	43.8	44.8	1.0
	25,19 <sup>2</sup>	550/161 <sup>3</sup>	6,796	2.9	46.5	46.5	47.3	0.8
	26,52 <sup>2</sup>	3,100/156 <sup>3</sup>	30,598	0.7	47.3	47.3	48.3	1.0
	27,68 <sup>2</sup>	2,448/2,173 <sup>3</sup>	27,617	0.8	47.9	47.9	48.8	0.9
	28,94 <sup>2</sup>	4,740/4,294 <sup>3</sup>	29,891	0.8	49.0	49.0	49.9	0.9
	30,42 <sup>2</sup>	6,705/2,154 <sup>3</sup>	37,442	0.7	50.7	50.7	51.4	0.7

<sup>1</sup>Feet above confluence with Alligator Lake

<sup>2</sup>Miles above confluence with Suwannee River

<sup>3</sup>Width/ Width within county boundary

FEDERAL EMERGENCY MANAGEMENT AGENCY

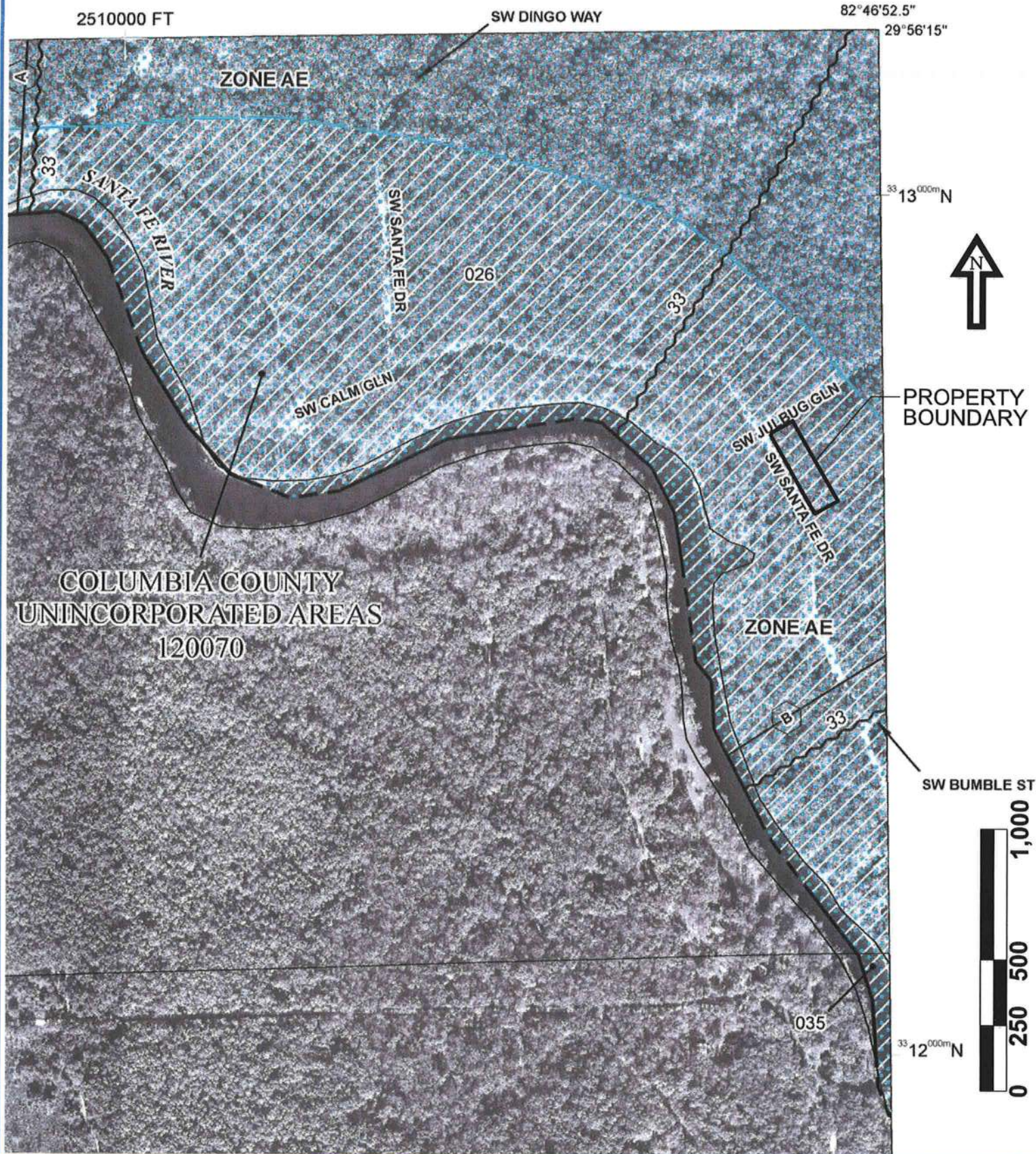
TABLE 3

COLUMBIA COUNTY, FL  
AND INCORPORATED AREAS

FLOODWAY DATA

ROSE CREEK - SANTA FE RIVER





## KELLEY ZERO RISE

FRIM PANEL 12023C 0466C

David M. Winsberg  
**Winsberg, Inc.**  
P.O. Box 2815  
Lake City FL, 32056  
PE# 68463 - CA# 29596  
For Permitting and  
Review. Not Final.

PROJECT #

1177

SHEET





**SUWANNEE  
RIVER  
WATER  
MANAGEMENT  
DISTRICT**

9225 CR 49  
LIVE OAK, FLORIDA 32060  
TELEPHONE: (386) 362-1001  
TELEPHONE: 800-226-1066  
FAX (386) 362-1056

**GENERAL PERMIT**

**PERMITTEE:**

ROBERT KELLEY, JR.  
7817 SW 161 ST AVE  
ARCHER, FL 32618

**PERMIT NUMBER:** ERP12-0116

**DATE ISSUED:** 09/21/2012

**DATE EXPIRES:** 09/21/2015

**COUNTY:** COLUMBIA

**TRS:** S26/T6S/R15E

**PROJECT:** R. KELLEY JR. DISTRICT FLOODWAY PROJECT

Approved entity to whom operation and maintenance may be transferred pursuant to rule 40B-4.1130, Florida Administrative Code (F.A.C.):

ROBERT KELLEY, JR.  
7817 SW 161 ST AVE  
ARCHER, FL 32618

Based on information provided, the Suwannee River Water Management District's (District) rules have been adhered to and an environmental resource general permit is in effect for the permitted activity description below:

**Construction of a single family residence within the floodway of the Santa Fe River in Columbia County without the use of fill. The house will be located at least seventy five feet from the top of the river bank, elevated on piles such that the bottom of the lowest horizontal structural member of the house is at least one foot above the one hundred year flood elevation for this specific site. The area below the lowest horizontal structural member will remain open and unobstructed except for piles and stairways.**

**All work will be completed pursuant to the conditions specified in District Rule 40B-4.3030 Florida Administrative Code and in a manner consistent with the site plan and application package information signed and sealed on and before September 20, 2012.**



It is your responsibility to ensure that adverse off-site impacts do not occur either during or after construction. Any additional construction or alterations not authorized by this permit may result in flood control or water quality problems both on and off site and will be a violation of District rule.

You or any other substantially affected persons are entitled to request an administrative hearing or mediation. Please refer to enclosed notice of rights.

This permit is issued under the provisions of chapter 373, F.S., chapter 40B-4, and chapter 40B-400, F.A.C. A general permit authorizes the construction, operation, maintenance, alteration, abandonment, or removal of certain minor surface water management systems. This permit authorizes the permittee to perform the work necessary to construct, operate, and maintain the surface water management system shown on the application and other documents included in the application. This is to notify you of District's agency action concerning Notice Of Intent. This action is taken pursuant to rule 40B-4 and 40B-400, F.A.C.

Standard Conditions for All General Permits:

1. The permittee shall perform all construction authorized in a manner so as to minimize adverse impacts to fish, wildlife, natural environmental values, and water quality. The permittee shall institute necessary measures during construction including riprap, reinforcement, or compaction of any fill materials placed around newly installed structures, to minimize erosion, turbidity, nutrient loading, and sedimentation in the receiving waters.
2. Water quality data representative of the water discharged from the permitted system, including, but not limited to, the parameters in chapter 62-302, F.A.C., shall be submitted to the District as required. If water quality data are required, the permittee shall provide data as required on the volume and rate of discharge including the total volume discharged during the sampling period. All water quality data shall be in accordance with and reference the specific method of analysis in "Standard Methods for the Examination of Water and Wastewater" by the American Public Health Association or "Methods for Chemical Analysis of Water and Wastes" by the U.S. Environmental Protection Agency.
3. The operational and maintenance phase of an environmental resource permit will not become effective until the owner or his authorized agent certifies that all facilities have been constructed in accordance with the design permitted by the District. If required by the District, such as-built

certification shall be made by an engineer or surveyor. Within 30 days after the completion of construction of the system, the permittee shall notify the District that the facilities are complete. If appropriate, the permittee shall request transfer of the permit to the responsible entity approved by the District for operation and maintenance. The District may inspect the system and, as necessary, require remedial measures as a condition of transfer of the permit or release for operation and maintenance of the system.

4. Off-site discharges during and after construction shall be made only through the facilities authorized by the permit. Water discharged from the project shall be through structures suitable for regulating upstream stage if so required by the District. Such discharges may be subject to operating schedules established by the District.

5. The permit does not convey to the permittee any property right nor any rights or privileges other than those specified in the permit and chapter 40B-1, F.A.C.

6. The permittee shall hold and save the District harmless from any and all damages, claims, or liabilities which may arise by reason of the construction, operation, maintenance, alteration, abandonment, or development in a Works of the District which is authorized by the permit.

7. The permit is issued based on the information submitted by the applicant which reasonably demonstrates that adverse off-site water resource impacts will not be caused by the permitted activity. It is the responsibility of the permittee to insure that such adverse impacts do not in fact occur either during or after construction.

8. It is the responsibility of the permittee to obtain all other clearances, permits, or authorizations required by any unit of local, state, or federal government.

9. The surfacewater management system shall be constructed prior to or concurrent with the development that the system is intended to serve and the system shall be completed within 30 days of substantial completion of the development which the system is intended to serve.

10. Except for General Permits After Notice or permits issued to a unit of government, or unless a different schedule is specified in the permit, the system shall be inspected at least once every third year after transfer of a permit to operation and maintenance by the permittee or his agent to ascertain that the system is being operated and maintained in a manner consistent with the permit. A report of inspection is to be sent to the District within 30 days of the inspection date. If required by chapter 471, F.S., such inspection and report shall be made by an engineer.

11. The permittee shall allow reasonable access to District personnel or agents for the purpose of inspecting the system to insure compliance with the permit. The permittee shall allow the District,

at its expense, to install equipment or devices to monitor performance of the system authorized by their permit.

12. The surfacewater management system shall be operated and maintained in a manner which is consistent with the conditions of the permit and chapter 40B-4.2040, F.A.C.

13. The permittee is responsible for the perpetual operation and maintenance of the system unless the operation and maintenance is transferred pursuant to chapter 40B-4.1130, F.A.C., or the permit is modified to authorize a new operation and maintenance entity pursuant to chapter 40B-4.1110, F.A.C.

14. All activities shall be implemented as set forth in the plans, specifications and performance criteria as approved by this permit. Any deviation from the permitted activity and the conditions for undertaking that activity shall constitute a violation of this permit.

15. This permit or a copy thereof, complete with all conditions, attachments, exhibits, and modifications, shall be kept at the work site of the permitted activity. The complete permit shall be available for review at the work site upon request by District staff. The permittee shall require the contractor to review the complete permit prior to commencement of the activity authorized by this permit.

16. Activities approved by this permit shall be conducted in a manner which do not cause violations of state water quality standards.

17. Prior to and during construction, the permittee shall implement and maintain all erosion and sediment control measures (best management practices) required to retain sediment on-site and to prevent violations of state water quality standards. All practices must be in accordance with the guidelines and specifications in the Florida Stormwater, Erosion, and Sedimentation Control Inspector's Manual unless a project specific erosion and sediment control plan is approved as part of the permit, in which case the practices must be in accordance with the plan. If site-specific conditions require additional measures during any phase of construction or operation to prevent erosion or control sediment, beyond those specified in the erosion and sediment control plan, the permittee shall implement additional best management practices as necessary, in accordance with the Florida Stormwater, Erosion, and Sedimentation Control Inspector's Manual. The permittee shall correct any erosion or shoaling that causes adverse impacts to the water resources.

18. Stabilization measures shall be initiated for erosion and sediment control on disturbed areas as soon as practicable in portions of the site where construction activities have temporarily or permanently ceased, but in no case more than seven days after the construction activity in that portion of the site has temporarily or permanently ceased.



19. At least 48 hours prior to commencement of activity authorized by this permit, the permittee shall submit to the District a Construction Commencement Notice Form No. 40B-1.901(14) indicating the actual start date and the expected completion date.

20. When the duration of construction will exceed one year, the permittee shall submit construction status reports to the District on an annual basis utilizing an Annual Status Report Form No. 40B-1.901(15). These forms shall be submitted during June of each following year.

21. For those systems which will be operated or maintained by an entity requiring an easement or deed restriction in order to provide that entity with the authority necessary to operate or maintain the system, such easement or deed restriction, together with any other final operation or maintenance documents as are required by Paragraph 40B-4.2030(2)(g), F.A.C., and Rule 40B-4.2035, F.A.C., must be submitted to the District for approval. Documents meeting the requirements set forth in these subsections of District rules will be approved. Deed restrictions, easements and other operation and maintenance documents which require recordation either with the Secretary of State or Clerk of the Circuit Court must be so recorded prior to lot or unit sales within the project served by the system, or upon completion of construction of the system, whichever occurs first. For those systems which are proposed to be maintained by county or municipal entities, final operation and maintenance documents must be received by the District when maintenance and operation of the system is accepted by the local governmental entity. Failure to submit the appropriate final documents referenced in this paragraph will result in the permittee remaining liable for carrying out maintenance and operation of the permitted system.

22. Each phase or independent portion of the permitted system must be completed in accordance with the permitted plans and permit conditions prior to the initiation of the permitted use of site infrastructure located within the area served by that portion or phase of the system. Each phase or independent portion of the system must be completed in accordance with the permitted plans and permit conditions prior to transfer of responsibility for operation and maintenance of that phase or portion of the system to a local government or other responsible entity.

23. Within 30 days after completion of construction of the permitted system, or independent portion of the system, the permittee shall submit a written statement of completion and certification by a registered professional engineer or other appropriate individual as authorized by law, using the supplied As-Built Certification Form No. 40B-1.901(16) incorporated by reference in Subsection 40B-1.901(16), F.A.C. When the completed system differs substantially from the permitted plans, any substantial deviations shall be noted and explained and two copies of as-built drawings submitted to the District. Submittal of the completed form shall serve to notify the District that the system is ready for inspection. The statement of completion and certification shall be based on on-site observation of construction (conducted by the registered professional engineer, or other appropriate individual as authorized by law, or under his or her direct supervision) or review of as-

built drawings for the purpose of determining if the work was completed in compliance with approved plans and specifications. As-built drawings shall be the permitted drawings revised to reflect any changes made during construction. Both the original and any revised specifications must be clearly shown. The plans must be clearly labeled as "as-built" or "record" drawing. All surveyed dimensions and elevations shall be certified by a registered surveyor. The following information, at a minimum, shall be verified on the as-built drawings:

- a. Dimensions and elevations of all discharge structures including all weirs, slots, gates, pumps, pipes, and oil and grease skimmers;
- b. Locations, dimensions, and elevations of all filter, exfiltration, or underdrain systems including cleanouts, pipes, connections to control structures, and points of discharge to the receiving waters;
- c. Dimensions, elevations, contours, or cross-sections of all treatment storage areas sufficient to determine stage-storage relationships of the storage area and the permanent pool depth and volume below the control elevation for normally wet systems, when appropriate;
- d. Dimensions, elevations, contours, final grades, or cross-sections of the system to determine flow directions and conveyance of runoff to the treatment system;
- e. Dimensions, elevations, contours, final grades, or cross-sections of all conveyance systems utilized to convey off-site runoff around the system;
- f. Existing water elevation(s) and the date determined; and
- g. Elevation and location of benchmark(s) for the survey.

24. The operation phase of this permit shall not become effective until the permittee has complied with the requirements of the condition in paragraph 23 above, the District determines the system to be in compliance with the permitted plans, and the entity approved by the District in accordance with Rule 40B-4.2035, F.A.C., accepts responsibility for operation and maintenance of the system. The permit may not be transferred to such approved operation and maintenance entity until the operation phase of the permit becomes effective. Following inspection and approval of the permitted system by the District, the permittee shall request transfer of the permit to the approved responsible operation and maintenance operating entity if different from the permittee. Until the permit is transferred pursuant to Rule 40B-4.1130, F.A.C., the permittee shall be liable for compliance with the terms of the permit.

25. Should any other regulatory agency require changes to the permitted system, the permittee shall provide written notification to the District of the changes prior to implementation so that a

determination can be made whether a permit modification is required.

26. This permit does not eliminate the necessity to obtain any required federal, state, local and special District authorizations prior to the start of any activity approved by this permit. This permit does not convey to the permittee or create in the permittee any property right, or any interest in real property, nor does it authorize any entrance upon or activities on property which is not owned or controlled by the permittee, or convey any rights or privileges other than those specified in the permit and in this chapter and Chapter 40B-4, F.A.C.

27. The permittee is hereby advised that Section 253.77, F.S., states that a person may not commence any excavation, construction, or other activity involving the use of sovereign or other lands of the state, the title to which is vested in the Board of Trustees of the Internal Improvement Trust Fund without obtaining the required lease, license, easement, or other form of consent authorizing the proposed use. Therefore, the permittee is responsible for obtaining any necessary authorizations from the Board of Trustees prior to commencing activity on sovereignty lands or other state-owned lands.

28. Any delineation of the extent of a wetland or other surface water submitted as part of the permit application, including plans or other supporting documentation, shall not be considered specifically approved unless a specific condition of this permit or a formal determination under 40B-400.046, F.A.C., provides otherwise.

29. The permittee shall notify the District in writing within 30 days of any sale, conveyance, or other transfer of ownership or control of the permitted system or the real property at which the permitted system is located. All transfers of ownership or transfers of a permit are subject to the requirements of Rule 40B-4.1130, F.A.C. The permittee transferring the permit shall remain liable for any corrective actions that may be required as a result of any permit violations prior to such sale, conveyance or other transfer.

30. If historical or archaeological artifacts are discovered at any time on the project site, the permittee shall immediately notify the District.

31. The permittee shall immediately notify the District in writing of any previously submitted information that is later discovered to be inaccurate.



Permit No.: ERP12-0116

Project: R. KELLEY JR. DISTRICT FLOODWAY PROJECT

Page 8 of 10

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WITHIN 30 DAYS AFTER COMPLETION OF THE PROJECT, THE PERMITTEE SHALL NOTIFY THE DISTRICT, IN WRITING, THAT THE FACILITIES ARE COMPLETE.

Approved by *Larry Barden* Date Approved 09/21/12  
District Staff

*Timothy Hagan*  
Clerk

*Chris Hinkle PhD*  
Executive Director



### NOTICE OF RIGHTS

1. A person whose substantial interests are or may be determined has the right to request an administrative hearing by filing a written petition with the Suwannee River Water Management District (District), or may choose to pursue mediation as an alternative remedy under Section 120.569 and 120.573, Florida Statutes, (F.S.), before the deadline for filing a petition. Choosing mediation will not adversely affect the right to a hearing if mediation does not result in a settlement. The procedures for pursuing mediation are set forth in Sections 120.569 and 120.57 F.S.. Pursuant to Rule 28-106.111, Florida Administrative Code, (F.A.C.), the petition must be filed at the office of the District Clerk at District Headquarters, 9225 C.R. 49, Live Oak, Florida 32060 within twenty-one (21) days of receipt of written notice of the decision or within twenty-one (21) days of newspaper publication of the notice of District decision (for those persons to whom the District does not mail actual notice). A petition must comply with Chapter 28-106, F.A.C.
2. If the Governing Board takes action which substantially differs from the notice of District decision to grant or deny the permit application, a person whose substantial interests are or may be determined has the right to request an administrative hearing or may choose to pursue mediation as an alternative remedy as described above. Pursuant to Rule 28-106.111, F.A.C., the petition must be filed at the office of the District Clerk at District Headquarters, 9225 C.R. 49, Live Oak, Florida 32060 within twenty-one (21) days of receipt of written notice of the decision or within twenty-one (21) days of newspaper publication of the notice of District decision (for those persons to whom the District does not mail actual notice). Such a petition must comply with Chapter 28-106, F.A.C.
3. A substantially interested person has the right to a formal administrative hearing pursuant to Section 120.569 and 120.57(1), F.S., where there is a dispute between the District and the party regarding an issue of material fact. A petition for formal hearing must comply with the requirements set forth in Rule 28-106.201, F.A.C.
4. A substantially interested person has the right to an informal hearing pursuant to Section 120.569 and 120.57(2), F.S., where no material facts are in dispute. A petition for an informal hearing must comply with the requirements set forth in Rule 28-106.301, F.A.C.
5. A petition for an administrative hearing is deemed filed upon receipt of the petition by the Office of the District Clerk at the District Headquarters in Live Oak, Florida.
6. Failure to file a petition for an administrative hearing within the requisite time frame shall constitute a waiver of the right to an administrative hearing pursuant to Rule 28-106.111, F.A.C.
7. The right to an administrative hearing and the relevant procedures to be followed is governed by Chapter 120, F.S., and Chapter 28-106, F.A.C.
8. Pursuant to Section 120.68, F.S., a person who is adversely affected by final District action may seek review of the action in the District Court of Appeal by filing a notice of appeal pursuant to the Florida Rules of Appellate Procedure, within 30 days of the rendering of the final District action.
9. A party to the proceeding before the District who claims that a District order is inconsistent with the provisions and purposes of Chapter 373, F.S., may seek review of the order pursuant to Section 373.114, F.S., by the Florida Land and Water Adjudicatory Commission, by filing a request for review with the Commission and serving a copy of the Department of Environmental Protection and any

person named in the order within 20 days of adoption of a rule or the rendering of the District order.

10. For appeals to the District Courts of Appeal, a District action is considered rendered after it is signed on behalf of the District, and is filed by the District Clerk.

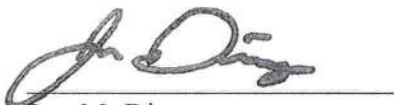
11. Failure to observe the relevant time frames for filing a petition for judicial review, or for Commission review, will result in waiver of the right to review.

#### CERTIFICATE OF SERVICE

I hereby certify that a copy of the foregoing Notice of Rights has been sent by U.S. Mail to:

ROBERT KELLEY, JR.  
7817 SW 161 ST AVE  
ARCHER, FL 32618

At 4:00 p.m. this 25 day of Sept, 2012.



Jon M. Dinges  
Deputy Clerk  
Suwannee River Water Management District  
9225 C.R. 49  
Live Oak, Florida 32060  
386.362.1001 or 800.226.1066 (Florida only)

cc: File Number: ERP12-0116





**Suwannee  
River  
Water  
Management  
District**

9225 CR 49  
Live Oak, FL 32060  
TELEPHONE: 386-362-1001  
TELEPHONE: 800-226-1066

Dear Permittee:

Enclosed is your approved Permit. Based on the activity described in your application, Suwannee River Water Management District (District) staff has reasonable assurance that the proposed construction meets conditions for issuance, provided you follow the permit conditions and your stated activity.

**The construction of a surfacewater management system requires filing a Notice of Commencement and as-built certification forms within 30 days of completion of construction. These forms are enclosed with your permit.**

Please note: your project may require a Generic Permit for Stormwater Discharge for Large and Small Construction Activities, as part of the Florida NPDES stormwater program regulated by the Florida Department of Environmental Protection (FDEP). This permit is separate from the Environmental Resource Permit and must be obtained through FDEP. Please refer to the FDEP program website, <http://www.dep.state.fl.us/water/stormwater/npdes/>, for information about the NPDES permit.

Be aware of the location of underground utilities before starting excavation.

If you wish, we will visit with you on site to discuss the terms of the permit, review existing pre-construction conditions, and answer any questions you may have prior to beginning work. If you would like to schedule a pre-construction meeting, please contact the Environmental Resource Permitting staff at 386.362.1001 or 800.226.1066.

**SUWANNEE RIVER WATER MANAGEMENT DISTRICT  
CONSTRUCTION COMMENCEMENT NOTICE**

Suwannee River Water Management District  
Department of Resource Management  
9225 County Road 49  
Live Oak, Florida 32060

PROJECT: \_\_\_\_\_ PHASE: \_\_\_\_\_

I hereby notify the Suwannee River Water Management District that the construction of the surface water management system authorized by Environmental Resource Permit No. \_\_\_\_\_ has commenced/is expected to commence on \_\_\_\_\_, 20\_\_\_\_, and will require duration of approximately \_\_\_\_ months/\_\_\_\_ weeks/days to complete. It is understood that should the construction term extend beyond one calendar year from the date of the permit issuance, I am obligated to submit the Annual Status Report for Surface Water Management System Construction form number 40B-1.901(15).

**Note:** If the construction commencement date is not shown, the District should be so notified in writing in order to satisfy permit conditions.

\_\_\_\_\_  
Type or Print Permittee's or Authorized Agent's Name

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Address

\_\_\_\_\_  
Permittee's or Authorized  
Agent's Signature

\_\_\_\_\_  
Title Company

\_\_\_\_\_  
Date

AS-BUILT VERIFICATION

(FOR PROJECTS NOT REQUIRING ENGINEERED PLANS)

I hereby notify the Suwannee River Water Management District that construction of the surfacewater management system authorized by permit number

\_\_\_\_\_, issued on \_\_\_\_\_, for

\_\_\_\_\_, has

been built in substantial conformance with the permitted drawings. I further confirm that operation and maintenance of the system will be performed as needed.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (Please print or type)

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Phone Number

Suwannee River Water Management District  
9225 County Road 49  
Live Oak, Florida 32060  
386.362.1001 or 800.226.1066 (Florida only)

Revised 7/02





1210-07



## SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 12-445-E CONTRACTOR TRACY WINTERS PHONE 386-623-4969  
 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.*

<input checked="" type="checkbox"/> <b>ELECTRICAL</b> 724	Print Name <u>LYNDON RAINBOLT</u> License #: <u>EC13001835</u>	Signature <u>[Signature]</u> Phone #: <u>386-867-1004</u>
<input checked="" type="checkbox"/> <b>MECHANICAL/A/C</b> 476	Print Name <u>LYNDON RAINBOLT</u> License #: <u>RA00066590</u>	Signature <u>[Signature]</u> Phone #: <u>386-867-1004</u>
<input checked="" type="checkbox"/> <b>PLUMBING/GAS</b>	Print Name <u>First Choice Plumbing</u> License #:	Signature _____ Phone #:
<input checked="" type="checkbox"/> <b>ROOFING</b> 544	Print Name <u>TRACY WINTERS</u> License #: <u>CBC059798</u>	Signature <u>[Signature]</u> Phone #: <u>386-623-4969</u>
<b>SHEET METAL</b>	Print Name _____ License #: <u>N/A</u>	Signature _____ Phone #:
<b>FIRE SYSTEM/SPRINKLER</b>	Print Name _____ License #: <u>N/A</u>	Signature _____ Phone #:
<b>SOLAR</b>	Print Name _____ License #: <u>N/A</u>	Signature _____ Phone #:

Specialty License	License Number	Sub Contractor's Printed Name	Sub Contractor's Signature
<input checked="" type="checkbox"/> <b>MASON</b> 544	<u>CBC059798</u>	<u>TRACY WINTERS</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> <b>CONCRETE FINISHER</b> 544	<u>"</u>	<u>TRACY WINTERS</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> <b>FRAMING</b>	<u>CBC059798</u>	<u>TRACY WINTERS</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> <b>INSULATION</b>	<u>"</u>	<u>TRACY WINTERS</u>	<u>[Signature]</u>
<b>STUCCO</b>	<u>N/A</u>		
<input checked="" type="checkbox"/> <b>DRYWALL</b> 544	<u>CBC059798</u>	<u>TRACY WINTERS</u>	<u>[Signature]</u>
<b>PLASTER</b>	<u>N/A</u>		
<input checked="" type="checkbox"/> <b>CABINET INSTALLER</b> 544	<u>CBC059798</u>	<u>TRACY WINTERS</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> <b>PAINTING</b> 544	<u>CBC059798</u>	<u>TRACY WINTERS</u>	<u>[Signature]</u>
<b>ACOUSTICAL CEILING</b>	<u>N/A</u>		
<b>GLASS</b>	<u>N/A</u>		
<input checked="" type="checkbox"/> <b>CERAMIC TILE</b> 544	<u>CBC059798</u>	<u>TRACY WINTERS</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> <b>FLOOR COVERING</b> 544	<u>CBC059798</u>	<u>TRACY WINTERS</u>	<u>[Signature]</u>
<b>ALUM/VINYL SIDING</b>	<u>N/A</u>		
<b>GARAGE DOOR</b>	<u>N/A</u>		
<b>METAL BLDG ERECTOR</b>	<u>N/A</u>		

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

## SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1210-57CONTRACTOR TRACY WHITEPHONE 386.633.4969ATTN: KEITH

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.

<b>ELECTRICAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>MECHANICAL/ A/C</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>* PLUMBING/ GAS 1350</b>	Print Name <u>Manuel Joseph Duran</u> License #: <u>CFC 427369</u>	Signature <u>[Signature]</u> Phone #: <u>772-879-1414</u>
<b>ROOFING</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SHEET METAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>FIRE SYSTEM/ SPRINKLER</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SOLAR</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____

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

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

Contractor Form: Subcontractor Form: 6/08



**FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION**

Florida Department of Business and Professional Regulation - Residential Performance Method

Project Name: Pierce Kelly Jr  
 Street: 126 Julbug Glen  
 City, State, Zip: Fort White, FL, 32038-  
 Owner: Pierce Kelly Jr  
 Design Location: FL, Gainesville

Builder Name: Great Southern Log Homes  
 Permit Office: Columbia County  
 Permit Number: 30553  
 Jurisdiction: 221000

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 above grade (ft²) 836  
 Conditioned floor area below grade (ft²) 0  
 7. Windows (161.1 sqft.) Description Area  
 a. U-Factor: Dbl, U=0.30 161.08 ft²  
 SHGC: SHGC=0.50  
 b. U-Factor: N/A ft²  
 SHGC:  
 c. U-Factor: N/A ft²  
 SHGC:  
 d. U-Factor: N/A ft²  
 SHGC:  
 Area Weighted Average Overhang Depth: 2.520 ft.  
 Area Weighted Average SHGC: 0.500  
 8. Floor Types (836.0 sqft.) Insulation Area  
 a. Raised Floor R=19.0 836.00 ft²  
 b. N/A R= ft²  
 c. N/A R= ft²

9. Wall Types (928.0 sqft.) Insulation Area  
 a. Frame - Wood, Exterior R=13.0 928.00 ft²  
 b. N/A R= ft²  
 c. N/A R= ft²  
 d. N/A R= ft²  
 10. Ceiling Types (919.6 sqft.) Insulation Area  
 a. Under Attic (Vented) R=30.0 919.60 ft²  
 b. N/A R= ft²  
 c. N/A R= ft²  
 11. Ducts R ft²  
 a. Sup: Attic, Ret: Attic, AH: RoomsInBlock1 6 209  
 12. Cooling systems kBtu/hr Efficiency  
 a. Central Unit 29.2 SEER:15.00  
 13. Heating systems kBtu/hr Efficiency  
 a. Electric Heat Pump 29.2 HSPF:7.70  
 14. Hot water systems  
 a. Electric Cap: 50 gallons  
 b. Conservation features EF: 0.920  
 None  
 15. Credits Pstat

Glass/Floor Area: 0.193

Total Proposed Modified Loads: 25.05  
 Total Standard Reference Loads: 31.53

**PASS**

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

PREPARED BY: \_\_\_\_\_

DATE: 10/8/12

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

OWNER/AGENT: \_\_\_\_\_

DATE: 10-22-12

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 completion of a Florida Air Barrier and Insulation Inspection Checklist

OFFICE



PROJECT												
Title:	Pierce Kelly Jr	Bedrooms:	2	Address Type:								
Building Type:	FLProp2010	Conditioned Area:	836	Lot #								
Owner:	Pierce Kelly Jr	Total Stories:	1	Block/SubDivision:								
# of Units:	1	Worst Case:	No	PlatBook:								
Builder Name:	Great Southern Log Homes	Rotate Angle:	0	Street:								
Permit Office:	Columbia County	Cross Ventilation:		County:								
Jurisdiction:		Whole House Fan:		City, State, Zip:								
Family Type:	Single-family			126 Julbug Glen Columbia Fort White , FL , 32038-								
New/Existing:	New (From Plans)											
Comment:												
CLIMATE												
✓	Design Location	TMY Site	IECC Zone	Design Temp 97.5 % 2.5 %		Int Design Temp Winter Summer		Heating Degree Days	Design Moisture	Daily Temp Range		
_____	FL, Gainesville	FL_GAINESVILLE_REGI	2	32	92	70	75	1305.5	51	Medium		
BLOCKS												
	Number	Name	Area	Volume								
	1	Block1	836	6688								
SPACES												
	Number	Name	Area	Volume	Kitchen	Occupants	Bedrooms	Infil ID	Finished	Cooled	Heated	
	1	RoomsInBlock1	836	6688	Yes	2	2	1	Yes	Yes	Yes	
FLOORS												
✓	#	Floor Type	Space	R-Value		Area		Tile		Wood	Carpet	
_____	1	Raised Floor	RoomsInBlock1	----	----	836 ft²		19		0	0 1	
ROOF												
✓	#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	SA Tested	Emitt	Emitt Tested	Deck Insul.	Pitch (deg)
_____	1	Gable or shed	Metal	1005 ft²	278 ft²	Light	0.96	No	0.9	No	0	33.7
ATTIC												
✓	#	Type	Ventilation	Vent Ratio (1 in)		Area		RBS	IRCC			
_____	1	Full attic	Vented	303		836 ft²		N	N			
CEILING												
✓	#	Ceiling Type	Space	R-Value		Area		Framing Frac		Truss Type		
_____	1	Under Attic (Vented)	RoomsInBlock1	30		919.6 ft²		0.11		Wood		

WALLS															
✓	#	Ornt	Adjacent To	Wall Type	Space	Cavity R-Value	Width Ft	In	Height Ft	In	Area	Sheathing R-Value	Framing Fraction	Solar Absor.	Below Grade%
✓	1	E	Exterior	Frame - Wood	RoomsInBlock	13	32		8		256 ft²		0.23	0.75	0
	2	W	Exterior	Frame - Wood	RoomsInBlock	13	32		8		256 ft²		0.23	0.75	0
	3	S	Exterior	Frame - Wood	RoomsInBlock	13	26		8		208 ft²		0.23	0.75	0
	4	N	Exterior	Frame - Wood	RoomsInBlock	13	26		8		208 ft²		0.23	0.75	0

DOORS											
✓	#	Ornt	Door Type	Space	Storms	U-Value	Width Ft	In	Height Ft	In	Area
	1	E=>E	Insulated	RoomsInBlock	None	0.460000	3		6	8	20 ft²

WINDOWS														
Orientation shown is the entered, Proposed orientation.														
✓	#	Ornt	Wall ID	Frame	Panes	NFRC	U-Factor	SHGC	Storms	Area	Overhang Depth	Separation	Int Shade	Screening
	1	E=>E	1	Wood	Double (Clear)	Yes	0.3	0.5	N	30.61111	9 ft 0 in	1 ft 6 in	HERS 2006	None
	2	N=>N	4	Wood	Double (Clear)	Yes	0.3	0.5	N	30.61111	1 ft 0 in	4 ft 0 in	HERS 2006	None
	3	S=>S	3	Wood	Double (Clear)	Yes	0.3	0.5	N	61.22222	1 ft 0 in	4 ft 0 in	HERS 2006	None
	4	N=>N	4	Wood	Double (Clear)	Yes	0.3	0.5	N	8.020833	1 ft 0 in	4 ft 0 in	HERS 2006	None
	5	N=>N	4	Wood	Double (Clear)	Yes	0.3	0.5	N	30.61111	1 ft 0 in	4 ft 0 in	HERS 2006	None

INFILTRATION								
#	Scope	Method	SLA	CFM 50	ELA	EqLA	ACH	ACH 50
1	BySpaces	Proposed SLA	0.000360	789.422	43.3382	81.5039	0.27719	7.08214

HEATING SYSTEM							
✓	#	System Type	Subtype	Efficiency	Capacity	Block	Ducts
	1	Electric Heat Pump	None	HSPF: 7.7	29.2 kBtu/hr	1	sys#1

COOLING SYSTEM									
✓	#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Block	Ducts
	1	Central Unit	None	SEER: 15	29.2 kBtu/hr	876 cfm	0.75	1	sys#1

HOT WATER SYSTEM									
✓	#	System Type	SubType	Location	EF	Cap	Use	SetPnt	Conservation
	1	Electric	None	RoomsInBlock	10.92	50 gal	50 gal	120 deg	None



## SOLAR HOT WATER SYSTEM

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

## DUCTS

✓	#	--- Supply --- Location	R-Value	Area	--- Return --- Location	Area	Leakage Type	Air Handler	CFM 25	Percent Leakage	QN	RLF	HVAC # Heat	Cool
_____	1	Attic	6	209 ft²	Attic	41.8 ft²	DSE=0.88	RoomslnBlo	0.0 cfm	0.00 %	0.00	0.60	1	1

## 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						Hours																
Schedule Type			1	2	3	4	5	6	7	8	9	10	11	12										
Cooling (WD)	AM	78	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	78										
Cooling (WEH)	AM	78	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	78										
Heating (WD)	AM	66	66	66	66	66	66	68	68	68	68	68	68	68										
	PM	68	68	68	68	68	68	68	68	68	68	68	66	66										
Heating (WEH)	AM	66	66	66	66	66	66	68	68	68	68	68	68	68										
	PM	68	68	68	68	68	68	68	68	68	68	68	66	66										

## MECHANICAL VENTILATION

Type	Supply CFM	Exhaust CFM	Fan Watts	HRV	Heating System	Run Time	Cooling System
None	0	0	0	0	1 - Electric Heat Pump	0%	1 - Central Unit

# Florida Code Compliance Checklist

Florida Department of Business and Professional Regulations  
Residential Whole Building Performance Method

ADDRESS: 126 Julbug Glen  
Fort White, FL, 32038-

PERMIT #:

## MANDATORY REQUIREMENTS SUMMARY - See individual code sections for full details.

COMPONENT	SECTION	SUMMARY OF REQUIREMENT(S)	CHECK
Air leakage	402.4	To be caulked, gasketed, weatherstripped or otherwise sealed. Recessed lighting IC-rated as meeting ASTM E 283. Windows and doors = 0.30 cfm/sq.ft. Testing or visual inspection required. Fireplaces: gasketed doors & outdoor combustion air. Must complete envelope leakage report or visually verify Table 402.4.2.	
Thermostat & controls	403.1	At least one thermostat shall be provided for each separate heating and cooling system. Where forced-air furnace is primary system, programmable thermostat is required. Heat pumps with supplemental electric heat must prevent supplemental heat when compressor can meet the load.	
Ducts	403.2.2	All ducts, air handlers, filter boxes and building cavities which form the primary air containment passageways for air distribution systems shall be considered ducts or plenum chambers, shall be constructed and sealed in accordance with Section 503.2.7.2 of this code.	
	403.3.3	Building framing cavities shall not be used as supply ducts.	
Water heaters	403.4	Heat trap required for vertical pipe risers. Comply with efficiencies in Table 403.4.3.2. Provide switch or clearly marked circuit breaker (electric) or shutoff (gas). Circulating system pipes insulated to = R-2 + accessible manual OFF switch.	
Mechanical ventilation	403.5	Homes designed to operate at positive pressure or with mechanical ventilation systems shall not exceed the minimum ASHRAE 62 level. No make-up air from attics, crawlspaces, garages or outdoors adjacent to pools or spas.	
Swimming Pools & Spas	403.9	Pool pumps and pool pump motors with a total horsepower (HP) of = 1 HP shall have the capability of operating at two or more speeds. Spas and heated pools must have vapor-retardant covers or a liquid cover or other means proven to reduce heat loss except if 70% of heat from site-recovered energy. Off/timer switch required. Gas heaters minimum thermal efficiency=78% (82% after 4/16/13). Heat pump pool heaters minimum COP= 4.0.	
Cooling/heating equipment	403.6	Sizing calculation performed & attached. Minimum efficiencies per Tables 503.2.3. Equipment efficiency verification required. Special occasion cooling or heating capacity requires separate system or variable capacity system. Electric heat >10kW must be divided into two or more stages.	
Ceilings/knee walls	405.2.1	R-19 space permitting.	

# ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE INDEX\* = 79

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

126 Julbug Glen, Fort White, FL, 32038-

1. New construction or existing	New (From Plans)	9. Wall Types	Insulation	Area
2. Single family or multiple family	Single-family	a. Frame - Wood, Exterior	R=13.0	928.00 ft <sup>2</sup>
3. Number of units, if multiple family	1	b. N/A	R=	ft <sup>2</sup>
4. Number of Bedrooms	2	c. N/A	R=	ft <sup>2</sup>
5. Is this a worst case?	No	d. N/A	R=	ft <sup>2</sup>
6. Conditioned floor area (ft <sup>2</sup> )	836	10. Ceiling Types	Insulation	Area
7. Windows**	Description	a. Under Attic (Vented)	R=30.0	919.60 ft <sup>2</sup>
a. U-Factor:	Dbl, U=0.30	b. N/A	R=	ft <sup>2</sup>
SHGC:	SHGC=0.50	c. N/A	R=	ft <sup>2</sup>
b. U-Factor:	N/A	11. Ducts		R ft <sup>2</sup>
SHGC:		a. Sup: Attic, Ret: Attic, AH: RoomsInBlock1		6 209
c. U-Factor:	N/A	12. Cooling systems	kBtu/hr	Efficiency
SHGC:		a. Central Unit	29.2	SEER:15.00
d. U-Factor:	N/A	13. Heating systems	kBtu/hr	Efficiency
SHGC:		a. Electric Heat Pump	29.2	HSPF:7.70
Area Weighted Average Overhang Depth:	2.520 ft.	14. Hot water systems		Cap: 50 gallons
Area Weighted Average SHGC:	0.500	a. Electric		EF: 0.92
8. Floor Types	Insulation	b. Conservation features		
a. Raised Floor	R=19.0	None		
b. N/A	R=	15. Credits		Pstat
c. N/A	R=			

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

Builder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address of New Home: \_\_\_\_\_ City/FL Zip: \_\_\_\_\_



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

\*\*Label required by Section 303.1.3 of the Florida Building Code, Energy Conservation, if not DEFAULT.



**Development Permit**  
**F 023- 12-006**

FLOOD ZONE AE BY BLK 2-4-2009 FIRM COMMUNITY # 120070 - PANEL # 0466-C  
FIRM 100 YEAR ELEVATION 33.39' PLAN INCLUDED YES or NO  
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 34.39'  
IN THE REGULATORY FLOODWAY YES or NO RIVER SANTA  
SURVEYOR / ENGINEER NAME David M. Winsberg LICENSE NUMBER 68463

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED

## COMMENTS

# Residential System Sizing Calculation

## Summary

Pierce Kelly Jr  
126 Julbug Glen  
Fort White, FL 32038-

Project Title:  
Pierce Kelly Jr

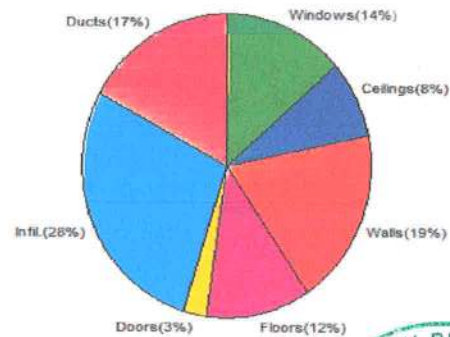
9/27/2012

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
<b>Total heating load calculation</b>	<b>13085 Btuh</b>	<b>Total cooling load calculation</b>	<b>17519 Btuh</b>
Submitted heating capacity	% of calc Btuh	Submitted cooling capacity	% of calc Btuh
Total (Electric Heat Pump)	223.2 29200	Sensible (SHR = 0.75)	164.6 21900
Heat Pump + Auxiliary(0.0kW)	223.2 29200	Latent	173.4 7300
		<b>Total (Electric Heat Pump)</b>	<b>166.7 29200</b>

## WINTER CALCULATIONS

Winter Heating Load (for 836 sqft)

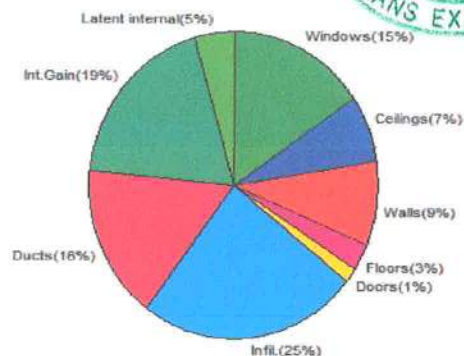
Load component		Load	
Window total	161 sqft	1788	Btuh
Wall total	747 sqft	2453	Btuh
Door total	20 sqft	340	Btuh
Ceiling total	920 sqft	1084	Btuh
Floor total	836 sqft	1551	Btuh
Infiltration	89 cfm	3612	Btuh
Duct loss		2257	Btuh
<b>Subtotal</b>		<b>13085</b>	<b>Btuh</b>
Ventilation	0 cfm	0	Btuh
<b>TOTAL HEAT LOSS</b>		<b>13085</b>	<b>Btuh</b>



## SUMMER CALCULATIONS

Summer Cooling Load (for 836 sqft)

Load component		Load	
Window total	161 sqft	2700	Btuh
Wall total	747 sqft	1558	Btuh
Door total	20 sqft	258	Btuh
Ceiling total	920 sqft	1230	Btuh
Floor total		503	Btuh
Infiltration	78 cfm	1452	Btuh
Internal gain		3320	Btuh
Duct gain		2286	Btuh
Sens. Ventilation	0 cfm	0	Btuh
Blower Load		0	Btuh
<b>Total sensible gain</b>		<b>13307</b>	<b>Btuh</b>
Latent gain(ducts)		560	Btuh
Latent gain(infiltration)		2852	Btuh
Latent gain(ventilation)		0	Btuh
Latent gain(internal/occupants/other)		800	Btuh
<b>Total latent gain</b>		<b>4211</b>	<b>Btuh</b>
<b>TOTAL HEAT GAIN</b>		<b>17519</b>	<b>Btuh</b>



8th Edition

EnergyGauge® System Sizing

PREPARED BY:

DATE:

*[Signature]*  
9/27/12

# System Sizing Calculations - Winter

## Residential Load - Whole House Component Details

Pierce Kelly Jr  
126 Julbug Glen  
Fort White, FL 32038-

Project Title:  
Pierce Kelly Jr  
Building Type: User

9/27/2012

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=	Load
1	2, NFRC 0.50	Wood	0.30	E	30.6		11.1	340 Btuh
2	2, NFRC 0.50	Wood	0.30	N	30.6		11.1	340 Btuh
3	2, NFRC 0.50	Wood	0.30	S	61.2		11.1	680 Btuh
4	2, NFRC 0.50	Wood	0.30	N	8.0		11.1	89 Btuh
5	2, NFRC 0.50	Wood	0.30	N	30.6		11.1	340 Btuh
	Window Total					161.1(sqft)		1788 Btuh
Walls	Type	Ornt.	Ueff.	R-Value (Cav/Sh)	Area	X	HTM=	Load
1	Frame - Wood	- Ext	(0.089)	13.0/0.0	205		3.28	675 Btuh
2	Frame - Wood	- Ext	(0.089)	13.0/0.0	256		3.28	841 Btuh
3	Frame - Wood	- Ext	(0.089)	13.0/0.0	147		3.28	482 Btuh
4	Frame - Wood	- Ext	(0.089)	13.0/0.0	139		3.28	456 Btuh
	Wall Total					747(sqft)		2453 Btuh
Doors	Type	Storm	Ueff.		Area	X	HTM=	Load
1	Insulated - Exterior, n		(0.460)		20		17.0	340 Btuh
	Door Total					20(sqft)		340Btuh
Ceilings	Type/Color/Surface	Ueff.	R-Value		Area	X	HTM=	Load
1	Vented Attic/L/Metal	(0.032)	30.0/0.0		920		1.2	1084 Btuh
	Ceiling Total					920(sqft)		1084Btuh
Floors	Type	Ueff.	R-Value		Size	X	HTM=	Load
1	Raised - Open	(0.050)	19.0		836.0 sqft		1.9	1551 Btuh
	Floor Total					836 sqft		1551 Btuh
	Envelope Subtotal:							7216 Btuh
Infiltration	Type	ACH	Volume(cuft)	Wall Ratio	CFM=			
	Natural	0.80	6688	1.00	89.2			3612 Btuh
Duct load	Average sealed, R6.0, Supply(Att), Return(Att)					(DLM of 0.208)		2257 Btuh
All Zones	Sensible Subtotal All Zones							13085 Btuh



# Manual J Winter Calculations

## Residential Load - Component Details (continued)

Pierce Kelly Jr  
126 Julbug Glen  
Fort White, FL 32038-

Project Title:  
Pierce Kelly Jr  
Building Type: User

9/27/2012

### WHOLE HOUSE TOTALS

<b>Totals for Heating</b>	Subtotal Sensible Heat Loss	13085 Btuh
	Ventilation Sensible Heat Loss	0 Btuh
	Total Heat Loss	13085 Btuh

### EQUIPMENT

1. Electric Heat Pump	#	29200 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

Pierce Kelly Jr  
126 Julbug Glen  
Fort White, FL 32038-

Project Title:  
Pierce Kelly Jr

9/27/2012

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	Ornt	Len	Hgt	Gross	Shaded	Unshaded	Shaded	Unshaded			
1	2 NFRC	0.50, 0.30	No	No	E		9.0ft.	1.5ft.	30.6	30.6	0.0	16	53	478	Btuh	
2	2 NFRC	0.50, 0.30	No	No	N		1.0ft.	4.0ft.	30.6	0.0	30.6	16	16	478	Btuh	
3	2 NFRC	0.50, 0.30	No	No	S		1.0ft.	4.0ft.	61.2	21.3	39.9	16	20	1112	Btuh	
4	2 NFRC	0.50, 0.30	No	No	N		1.0ft.	4.0ft.	8.0	0.0	8.0	16	16	125	Btuh	
5	2 NFRC	0.50, 0.30	No	No	N		1.0ft.	4.0ft.	30.6	0.0	30.6	16	16	478	Btuh	
	Excursion													29	Btuh	
	Window Total								161 (sqft)					2700 Btuh		
Walls	Type						U-Value		R-Value		Area(sqft)		HTM		Load	
									Cav/Sheath							
1	Frame - Wood - Ext						0.09		13.0/0.0		205.4		2.1		428 Btuh	
2	Frame - Wood - Ext						0.09		13.0/0.0		256.0		2.1		534 Btuh	
3	Frame - Wood - Ext						0.09		13.0/0.0		146.8		2.1		306 Btuh	
4	Frame - Wood - Ext						0.09		13.0/0.0		138.8		2.1		289 Btuh	
	Wall Total								747 (sqft)					1558 Btuh		
Doors	Type										Area (sqft)		HTM		Load	
	Insulated - Exterior										20.0		12.9		258 Btuh	
	Door Total								20 (sqft)					258 Btuh		
Ceilings	Type/Color/Surface						U-Value		R-Value		Area(sqft)		HTM		Load	
	Vented Attic/Light/Metal						0.032		30.0/0.0		919.6		1.34		1230 Btuh	
	Ceiling Total								920 (sqft)					1230 Btuh		
Floors	Type								R-Value		Size		HTM		Load	
	Raised - Open								19.0		836 (sqft)		0.6		503 Btuh	
	Floor Total								836.0 (sqft)					503 Btuh		
	Envelope Subtotal:													6249 Btuh		
Infiltration	Type						ACH		Volume(cuft)		Wall Ratio		CFM=		Load	
	SensibleNatural						0.70		6688		747		89.2		1452 Btuh	
Internal gain							Occupants		Btuh/occupant				Appliance		Load	
							3		X 230		+		2400		3090 Btuh	
	Sensible Envelope Load:													10791 Btuh		
Duct load	Average sealed, Supply(R6.0-Attic), Return(R6.0-Attic)										(DGM of 0.207)			2286 Btuh		
	Sensible Load All Zones													13077 Btuh		

# Manual J Summer Calculations

## Residential Load - Component Details (continued)

Pierce Kelly Jr  
126 Julbug Glen  
Fort White, FL 32038-

Project Title:  
Pierce Kelly Jr

Climate:FL\_GAINESVILLE\_REGIONAL\_A

9/27/2012

### WHOLE HOUSE TOTALS

Whole House Totals for Cooling	<b>Sensible Envelope Load All Zones</b>	<b>11021 Btuh</b>
	Sensible Duct Load	2286 Btuh
	<b>Total Sensible Zone Loads</b>	<b>13307 Btuh</b>
	Sensible ventilation	0 Btuh
	Blower	0 Btuh
	<b>Total sensible gain</b>	<b>13307 Btuh</b>
	Latent infiltration gain (for 54 gr. humidity difference)	2852 Btuh
	Latent ventilation gain	0 Btuh
	Latent duct gain	560 Btuh
	Latent occupant gain (4 people @ 200 Btuh per person)	800 Btuh
	Latent other gain	0 Btuh
	<b>Latent total gain</b>	<b>4211 Btuh</b>
	<b>TOTAL GAIN</b>	<b>17519 Btuh</b>

### EQUIPMENT

1. Central Unit	#	29200 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



Old Permit

07-202



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
ON-SITE SEWAGE TREATMENT AND DISPOSAL SYSTEM  
CONSTRUCTION INSPECTION AND FINAL APPROVAL

PERMIT NO. 12-36-113562  
DATE PAID: 5/1/07  
FEE PAID: 350.00  
RECEIPT #: 11 P.D. 61161

APPLICANT:

Robert Kelly

AGENT:

FORD

PROPERTY ADDRESS:

126 SW SANTA FE DR.

LOT: 78

BLOCK: 10

SUBDIVISION: 3 AVERA LST

PROPERTY ID #: 0051-000

CHECKED [X] ITEMS ARE NOT IN COMPLIANCE WITH STATUTE OR RULE AND MUST BE CORRECTED.

TANK INSTALLATION		OUTLETS	
[ ] [01]	TANK SIZE (1) 300 (2)	[ ] [27]	SURFACE WATER 7100 FT
[ ] [02]	TANK MATERIAL Fiberglass	[ ] [28]	DITCHES 71A FT
[ ] [03]	OUTLET DEVICE	[ ] [29]	PRIVATE WELLS 26 FT
[ ] [04]	MULTI-CHECKED [X] (H)	[ ] [30]	PUBLIC WELLS 71A FT
[ ] [05]	OUTLET FILTER	[ ] [31]	IRRIGATION WELLS 71A FT
[ ] [06]	LEGEND 20 1/2 - HAI - CS	[ ] [32]	POSSIBLE WATER LINES 71 FT
[ ] [07]	WATERTIGHT	[ ] [33]	BUILDING FOUNDATION 71 FT
[ ] [08]	LEVEL	[ ] [34]	PROPERTY LINES 71 FT
[ ] [09]	DEPTH TO LID	[ ] [35]	OTHER
DRAINFIELD INSTALLATION		FILLED / BOUND SYSTEM	
[ ] [10]	AREA (1) 30 (2) 50 FT	[ ] [36]	DRAINFIELD COVER 71A
[ ] [11]	DISTRIBUTION BOX HEADER X	[ ] [37]	ENCLOSURES
[ ] [12]	NUMBER OF DRAINLINES 2 (40, 40)	[ ] [38]	SLOPES
[ ] [13]	DRAINLINE SEPARATION	[ ] [39]	STABILIZATION
[ ] [14]	DRAINLINE SLOPE	ADDITIONAL INFORMATION	
[ ] [15]	DEPTH OF COVER	[ ] [40]	UNOCCUPIED AREA
[ ] [16]	ELEVATION (ABOVE/BELOW) BM 5' 4"	[ ] [41]	STORMWATER RUNOFF
[ ] [17]	SYSTEM LOCATION	[ ] [42]	ALARM
[ ] [18]	DOSING PUMP	[ ] [43]	MAINTENANCE AGREEMENT
[ ] [19]	AGGREGATE SIZE	[ ] [44]	BUILDING AREA
[ ] [20]	AGGREGATE EXCESSIVE FINES	[ ] [45]	LOCATION CONFORMS WITH SITE PLAN
[ ] [21]	AGGREGATE DEPTH	[ ] [46]	FINAL SITE GRADING
FILL / RECAVATION MATERIAL		[ ] [47]	CONTRACTOR Felton G. Ready
[ ] [22]	FILL AMOUNT	[ ] [48]	OTHER
[ ] [23]	FILL TEXTURE	ABANDONMENT	
[ ] [24]	RECAVATION DEPTH	[ ] [49]	TANK PUMPED 71A
[ ] [25]	AREA REPLACED	[ ] [50]	TANK CRUSHED & FILLED 71A
[ ] [26]	REPLACEMENT MATERIAL		

EXPLANATION OF VIOLATIONS / REMARKS:

[ ] Tank Model 40-500  
[ ] Hold for 78, 93, 94, 95, 96

CONSTRUCTION [APPROVED/DISAPPROVED]:

FINAL SYSTEM [APPROVED/DISAPPROVED]:

HS 6016, 10/97 (Previous Editions May Be Used)

APPLICANT

Page 2 of 3

# PRODUCT APPROVAL SPECIFICATION SHEET

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

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
<b>1. EXTERIOR DOORS</b>			
A. SWINGING	Therma-Tru	Exterior	FI 15225.3
B. SLIDING			
C. SECTIONAL/ROLL UP			
D. OTHER			
<b>2. WINDOWS</b>			
A. SINGLE/DOUBLE HUNG	Pella		FI 12952.2
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. FIXED			
E. MULLION			
F. SKYLIGHTS			
G. OTHER			
<b>3. PANEL WALL</b>			
A. SIDING			
B. SOFFITS			
C. STOREFRONTS			
D. GLASS BLOCK			
E. OTHER			
<b>4. ROOFING PRODUCTS</b>			
A. ASPHALT SHINGLES			
B. NON-STRUCT METAL	Gulf Coast	26ga TUFF RIB	FI 11651.22
C. ROOFING TILES			
D. SINGLE PLY ROOF			
E. OTHER			
<b>5. STRUCT COMPONENTS</b>			
A. WOOD CONNECTORS	Simpson		FI 10456.11
B. WOOD ANCHORS			<del>FI 10456.11</del>
C. TRUSS PLATES	Alpine		FI 1999.3
D. INSULATION FORMS			
E. LINTELS			
F. OTHERS			
<b>6. NEW EXTERIOR ENVELOPE PRODUCTS</b>			
A.			



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

*[Signature]*

APPLICANT SIGNATURE

3-27-12

DATE

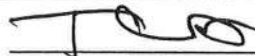


# PRODUCT APPROVAL SPECIFICATION SHEET

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<b>2. WINDOWS</b>			
A. SINGLE/DOUBLE HUNG	Pella		FI 12952.2
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. FIXED			
E. MULLION			
F. SKYLIGHTS			
G. OTHER			
<b>3. PANEL WALL</b>			
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B. SOFFITS			
C. STOREFRONTS			
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B. NON-STRUCT METAL	Gulf Coast	26ga TUFF RIB	FI 11651.22
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A. WOOD CONNECTORS			<del>FI 10456.11</del>
B. WOOD ANCHORS			
C. TRUSS PLATES	Alpine		FI 1999.3
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E. LINTELS			
F. OTHERS			
<b>6. NEW EXTERIOR ENVELOPE PRODUCTS</b>			
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APPLICANT SIGNATURE

3-27-12

DATE



# 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:1UQ22327Z0104080049



Truss Fabricator: Duley Truss  
Job Identification: J0649A-CRACKER STYLE LOG HOMES PIERCE KELLEY (J0649A-CRACKER STYLE LOG HOMES PIERCE KELLEY)  
Truss Count: 3  
Model Code: Florida Building Code 2007 and 2009 Supplement  
Truss Criteria: FBC2007Res/TPI-2002(STD)  
Engineering Software: Alpine Software, Version 10.02.  
Structural Engineer of Record: The identity of the structural EOR did not exist as of the seal date per section 61G15-31.003(5a) of the FAC  
Address:  
Minimum Design Loads: Roof - 37.0 PSF @ 1.25 Duration  
Floor - N/A  
Wind - 120 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: HCUSR2327

Walter P. Finn  
-Truss Design Engineer-

1950 Marley Drive  
Haines City, FL 33844

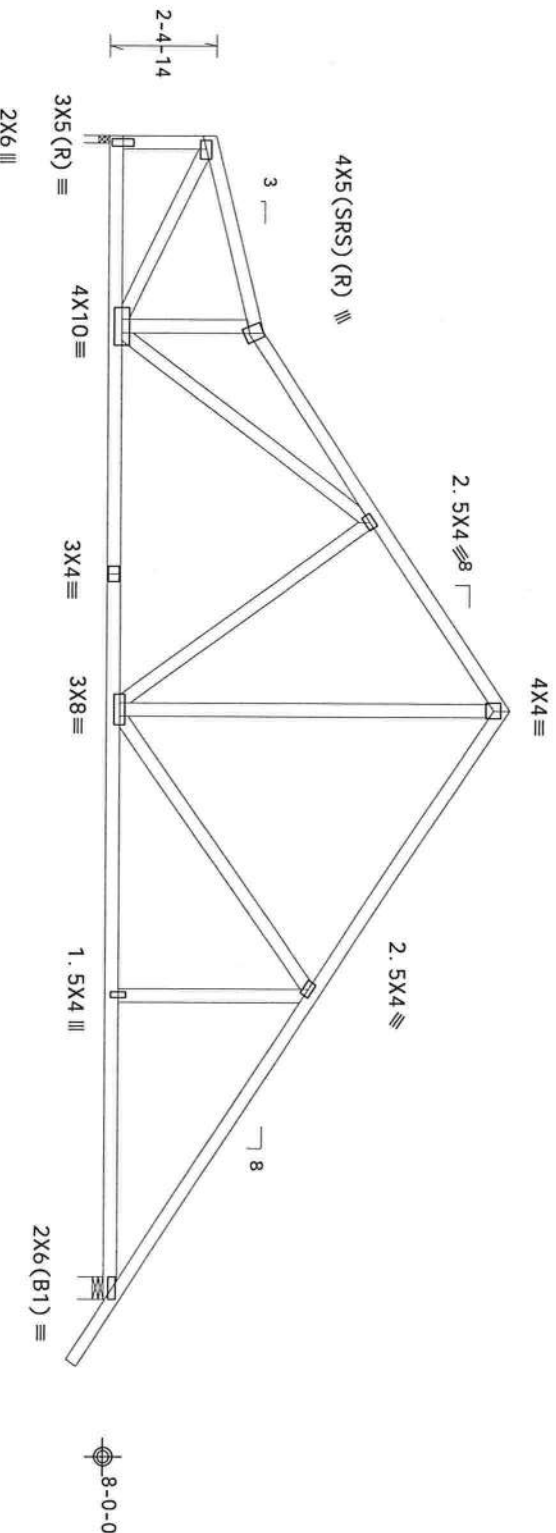
Details: A1201505-GBLLETIN-

#	Ref	Description	Drawing#	Date
1	94593--T3		12278001	10/04/12
2	94594--T2		12278002	10/04/12
3	94595--T1		12278003	10/04/12



Deflection meets L/360 live and L/240 total load.

In lieu of rigid ceiling use purlins to brace BC @ 24" OC.  
Bottom chord checked for 10.00 psf non-concurrent live load.



117 U=202 W=6"

Design Crit: FBC2007Res/TP1 -2002(STD

$$FT/RT=20\%(0\%)/10(0)$$

10:02. 06-1313548

QTY 39

FL/-/2/-/-/R/-

Scale = 25"/Ft

ALPINE

ITW Building Components Group Inc.

Haines City, FL 33844  
FL COA #0278

**\*\*\*IMPORTANT\*\*\* READ AND FOLLOW ALL NOTES ON THIS SHEET!  
FURNISH THIS DESIGN TO ALL CONTRACTORS INCLUDING INSTALLERS.**

Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Follow the latest edition of BCSP Building Component Safety Information Bulletin and WFOC's Truss Design Manual, and consult with the manufacturer's technical support personnel. All truss practices not or to performing these functions. Installers shall provide temporary bracing per BCSP's Truss Design Manual. Top chord shall have properly attached structural sheathing and bolts. Trusses shall have a properly attached rafter collar. Locations shown for permanent lateral restraint shall have bracing installed per BCSP sections 8C, 87 or 810, as applicable.

The Building Components Group Inc. (BCHGOC) shall not be responsible for any deviation from this design. The manufacturer shall be responsible for providing the correct design and for providing the correct details, unless noted otherwise. Refer to drawings 160A-2 for standard pail positions. A seal on the drawing or cover page listing this drawing indicates acceptance of professional engineering responsibility solely for the design shown. The suitability and use of this design for any structure is the responsibility of the building designer. Per ANSI/TPI 1, Sec. 2, for more information see: This is a design of BCHGOC. For a full design of BCHGOC, visit: [www.bchgo.com](http://www.bchgo.com). For more information see: This is a design of BCHGOC. For a full design of BCHGOC, visit: [www.bchgo.com](http://www.bchgo.com). For more information see: This is a design of BCHGOC. For a full design of BCHGOC, visit: [www.bchgo.com](http://www.bchgo.com).

STATE OF FLORIDA  
PROFESSIONAL ENGINEER  
No. 12546  
DAVID A. HINES

10/04/2012

TC LL	20.0 PSF	REF R2327- 94593
TC DL	7.0 PSF	DATE 10/04/12
BC DL	10.0 PSF	DRW HCURSR2327 12278001
BC LL	0.0 PSF	HC-ENG SSB/WPF
TOT. LD.	37.0 PSF	SEON- 495577
DUR. FAC.	1.25	FROM JRG
SPACING	24.0"	JREF- 1U022327Z01

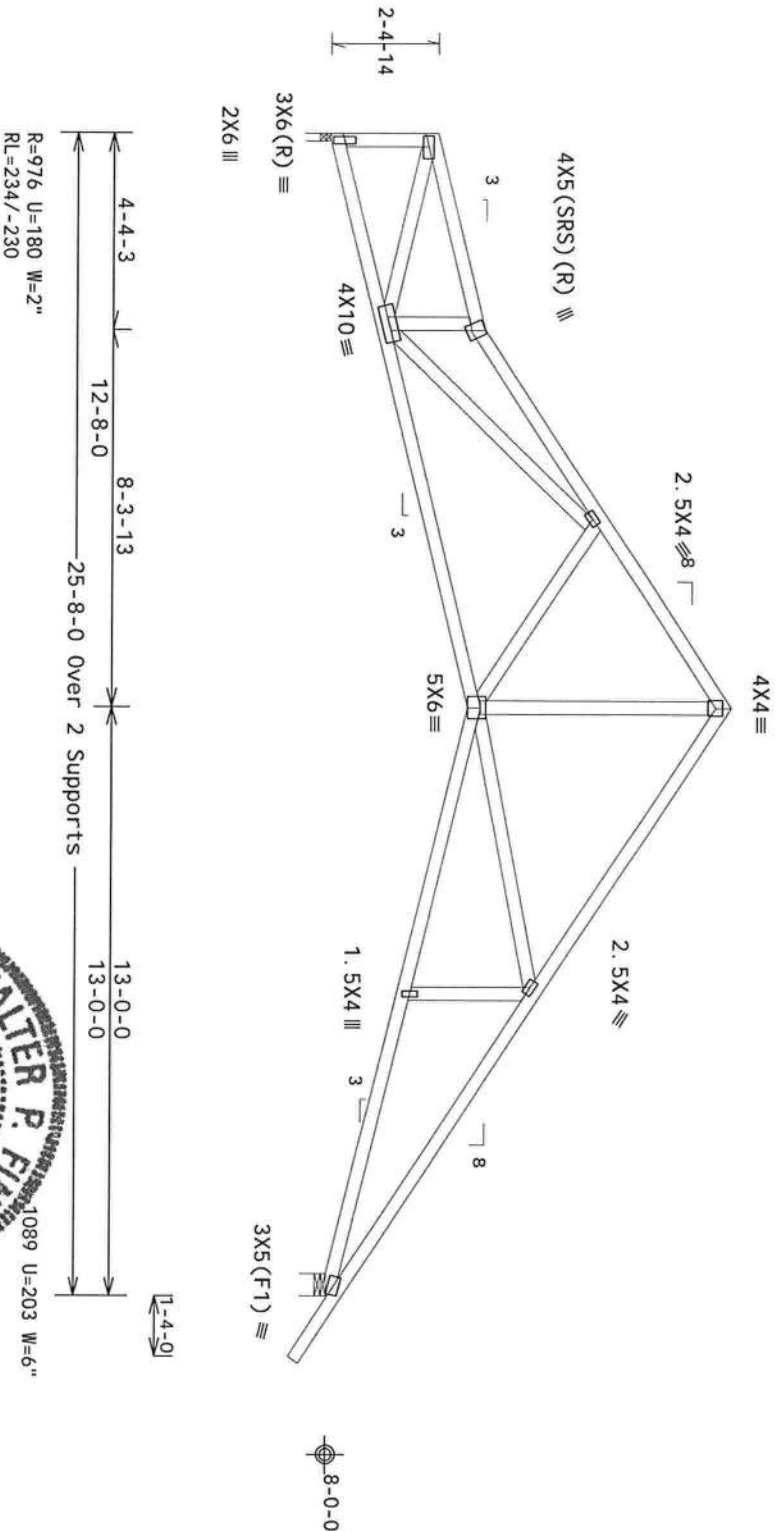
Top chord 2x4 SP #2 Dense  
Bot chord 2x4 SP #2 Dense  
Webs 2x4 SP #3

120 mph wind, 15.00 ft mean hgt, ASCE 7-05, CLOSED bldg, Located anywhere in roof, CAT II, EXP B, wind TC DL=4.2 psf, wind BC DL=5.0 psf.  $I_w=1.00$  GCPI (+/-)=0.18

Left end vertical not exposed to wind pressure.

Bottom chord checked for 10.00 psf non-concurrent live load.

This design is based on lumber values in effect prior to June 1, 2012 and shall only be used on projects designed and permitted prior to this date unless specifically approved in writing by the building authority having jurisdiction, the building designer and the project owner.  
Wind loads and reactions based on MMFRS with additional C&C member design.  
In lieu of rigid ceiling use purlins to brace BC @ 24" OC.  
Deflection meets L/360 live and L/240 total load.



PLT TYP. Wave

R=976 U=180 W=2"  
RL=234/-230

Design Criteria: FBC2007Res/TPI-2002(Std)

FT/RT=20%(0%)/10(0)

10/02/06 12:28:33

QTY 6

FL/-/2/-/-/R/-

Scale = .25" / Ft.

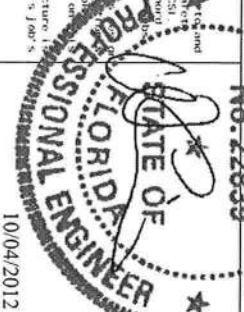
ALPINE

ITW Building Components Group Inc.

Haines City, FL 33844

FL COA #0 278

**\*\*IMPORTANT\*\*** READ AND FOLLOW ALL NOTES ON THIS SHEET  
FURNISH THIS DESIGN TO ALL CONTRACTORS INCLUDING INSTALLERS  
Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Follow the latest edition of BCSI (Building Component Safety Information, by TPI and WTA) for detailed instructions for performing these functions. Installers shall provide temporary bracing and bracing details, unless noted otherwise. Refer to drawings 1604-Z for standard plate positions. A seal on the drawing or cover page listing this drawing indicates acceptance of professional engineering. The responsibility of the building designer and the building owner for the design and construction of the structure shall have bracing installed per BCSI sections B3, B7 or B10 as applicable.  
ITW Building Components Group Inc. (ITWBCG) shall not be responsible for any deviation from any failure to build the truss in conformance with ANSI/TPI 1, or for handling, shipping, installing, bracing or covering of trusses. Apply plates to each face of truss and position as shown above and on the drawings. The building designer and the building owner shall be responsible for the design and construction of the structure. The building designer and the building owner shall be responsible for the design and construction of the structure. The building designer and the building owner shall be responsible for the design and construction of the structure.  
TPI: www.tpi.com WTA: www.wta.com  
ITC: www.itc.com



TC LL	20.0 PSF	REF R2327 - 94594
TC DL	7.0 PSF	DATE 10/04/12
BC DL	10.0 PSF	DRW HCUR2327 12278002
BC LL	0.0 PSF	HC-ENG SSB/WPF
TOT. LD.	37.0 PSF	SEON- 495582
DUR. FAC.	1.25	FROM JRG
SPACING	24.0"	JREF - 1U022327Z01



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This design is based on Lumber values in effect prior to June 1, 2012 and shall only be used on projects designed and permitted prior to that date. Use on subsequent projects is not permitted.

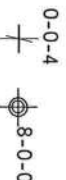
Wind loads and reactions based on MMFRS with additional C&C member design.

Wind loads and reactions based on MWFRS with additional C&C member design.

See DWGS A12015050109 & GBLLETIN0212 for more requirements

Bottom chord checked for 10.00 psf non-concurrent live load

Bottom chord checked for 10.00 psf non-concurrent live load


$$2.5 \times 4(D1) =$$

13-0-0

9.

Design Crit: FBC2007Res/TP1-2002(STD

FT/RT=20%(0%)/10(0)

10:02. 0401222839 DTY

FL/-/2/-/-/R/-

Scale = .3125"/Ft

FLORIDA

ORIGINAL COPY

10/04/2012

10/04/2012

10/04/2012

TC LL	20.0 PSF	REF	R2327 - 94595
TC DL	7.0 PSF	DATE	10/04/12
BC DL	10.0 PSF	DRW	HCUSR2327 12278003
BC LL	0.0 PSF	HC-ENG	SSB/WPF
TOT. LD.	37.0 PSF	SECN-	495594
DUR. FAC.	1.25	FROM	JRG
SPACING	24.0"	JREF-	1U022327Z01

GABLE STUD REINFORCEMENT DETAIL

## MAX GABLE VERTICAL LENGTH

2x4 GABLE VERTICAL SPACING   SPECIES   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	GROUP A	GROUP B
24" O.C.	SPF	#1 / #2	3' 7"	6' 3"	6' 5"	7' 4"	7' 7"	8' 9"	9' 0"	11' 7"	11' 11"	13' 9"	14' 0"
		#3	3' 6"	5' 5"	5' 5"	7' 2"	7' 2"	8' 9"	8' 9"	11' 1"	11' 1"	13' 9"	13' 9"
		STUD	3' 6"	5' 4"	5' 4"	7' 1"	7' 1"	8' 9"	8' 9"	11' 1"	11' 1"	13' 9"	13' 9"
	H/F	STANDARD	3' 6"	4' 7"	4' 7"	6' 1"	6' 1"	8' 2"	8' 2"	9' 6"	9' 6"	12' 11"	12' 11"
		#1	3' 11"	6' 3"	6' 8"	7' 4"	7' 11"	8' 9"	9' 6"	11' 7"	12' 6"	13' 9"	14' 0"
		#2	3' 10"	6' 3"	6' 8"	7' 4"	7' 11"	8' 9"	9' 6"	11' 7"	12' 6"	13' 9"	14' 0"
	SP	#3	3' 8"	5' 6"	5' 6"	7' 4"	7' 4"	8' 9"	9' 3"	11' 5"	11' 5"	13' 9"	14' 0"
		STUD	3' 8"	5' 6"	5' 6"	7' 3"	7' 3"	8' 9"	9' 3"	11' 3"	11' 3"	13' 9"	14' 0"
		STANDARD	3' 7"	4' 9"	4' 9"	6' 3"	6' 3"	8' 5"	8' 5"	9' 9"	9' 9"	13' 2"	13' 2"
	D/F	#1 / #2	4' 1"	7' 1"	7' 4"	8' 5"	8' 8"	10' 1"	10' 4"	13' 3"	13' 3"	14' 0"	14' 0"
		#3	4' 0"	6' 7"	6' 7"	8' 5"	8' 5"	10' 1"	10' 1"	13' 3"	13' 3"	14' 0"	14' 0"
		STUD	4' 0"	6' 7"	6' 7"	8' 5"	8' 5"	10' 1"	10' 1"	13' 3"	13' 3"	14' 0"	14' 0"
16" O.C.	SPF	#1	4' 6"	7' 1"	7' 8"	8' 5"	9' 1"	10' 1"	10' 1"	13' 3"	14' 0"	14' 0"	14' 0"
		#2	4' 5"	7' 1"	7' 8"	8' 5"	9' 1"	10' 1"	10' 1"	13' 3"	14' 0"	14' 0"	14' 0"
		#3	4' 3"	6' 9"	6' 9"	8' 5"	8' 11"	10' 1"	10' 7"	13' 3"	13' 9"	14' 0"	14' 0"
	H/F	STANDARD	4' 0"	5' 8"	5' 8"	7' 5"	7' 5"	8' 5"	10' 1"	10' 1"	11' 8"	14' 0"	14' 0"
		#1	4' 6"	7' 1"	7' 8"	8' 5"	9' 1"	10' 1"	10' 1"	13' 3"	14' 0"	14' 0"	14' 0"
		#2	4' 5"	7' 1"	7' 8"	8' 5"	9' 1"	10' 1"	10' 1"	13' 3"	14' 0"	14' 0"	14' 0"
	SP	#3	4' 3"	6' 9"	6' 9"	8' 5"	8' 11"	10' 1"	10' 7"	13' 3"	13' 9"	14' 0"	14' 0"
		STUD	4' 3"	6' 9"	6' 9"	8' 5"	8' 11"	10' 1"	10' 7"	13' 3"	13' 9"	14' 0"	14' 0"
		STANDARD	4' 1"	5' 10"	5' 10"	7' 8"	7' 8"	10' 1"	10' 3"	11' 11"	11' 11"	14' 0"	14' 0"
	D/F	#1 / #2	4' 7"	7' 10"	8' 1"	9' 3"	9' 6"	11' 1"	11' 5"	14' 0"	14' 0"	14' 0"	14' 0"
		#3	4' 5"	7' 8"	7' 8"	9' 3"	9' 3"	11' 1"	11' 1"	14' 0"	14' 0"	14' 0"	14' 0"
		STUD	4' 5"	7' 7"	7' 7"	9' 3"	9' 3"	11' 1"	11' 1"	14' 0"	14' 0"	14' 0"	14' 0"
12" O.C.	SPF	#1	5' 0"	7' 10"	8' 5"	9' 3"	10' 0"	11' 1"	11' 1"	14' 0"	14' 0"	14' 0"	14' 0"
		#2	4' 10"	7' 10"	8' 5"	9' 3"	10' 0"	11' 1"	11' 1"	14' 0"	14' 0"	14' 0"	14' 0"
		#3	4' 8"	7' 10"	7' 10"	9' 3"	9' 9"	11' 1"	11' 8"	14' 0"	14' 0"	14' 0"	14' 0"
	H/F	STANDARD	4' 7"	7' 9"	7' 9"	9' 3"	9' 9"	11' 1"	11' 8"	14' 0"	14' 0"	14' 0"	14' 0"
		#1	5' 0"	7' 10"	8' 5"	9' 3"	10' 0"	11' 1"	11' 1"	14' 0"	14' 0"	14' 0"	14' 0"
		#2	4' 10"	7' 10"	8' 5"	9' 3"	10' 0"	11' 1"	11' 1"	14' 0"	14' 0"	14' 0"	14' 0"
	SP	#3	4' 8"	7' 10"	7' 10"	9' 3"	9' 9"	11' 1"	11' 8"	14' 0"	14' 0"	14' 0"	14' 0"
		STUD	4' 8"	7' 9"	7' 9"	9' 3"	9' 9"	11' 1"	11' 8"	14' 0"	14' 0"	14' 0"	14' 0"
		STANDARD	4' 7"	6' 8"	6' 8"	8' 10"	8' 10"	11' 1"	11' 5"	13' 9"	13' 9"	14' 0"	14' 0"

## GABLE TRUSS DETAIL NOTES:

LIVE LOAD DEFLECTION CRITERIA IS L/240  
PROVIDE UPLIFT CONNECTIONS FOR 105 PLF OVER  
CONTINUOUS BEARING (5 PSF TC DEAD LOAD).  
CABLE END SUPPORTS LOAD FROM 4'-0"  
OUTLITTERS WITH 2'-0" OVERHANG OR 12"  
PLYWOOD OVERHANG.

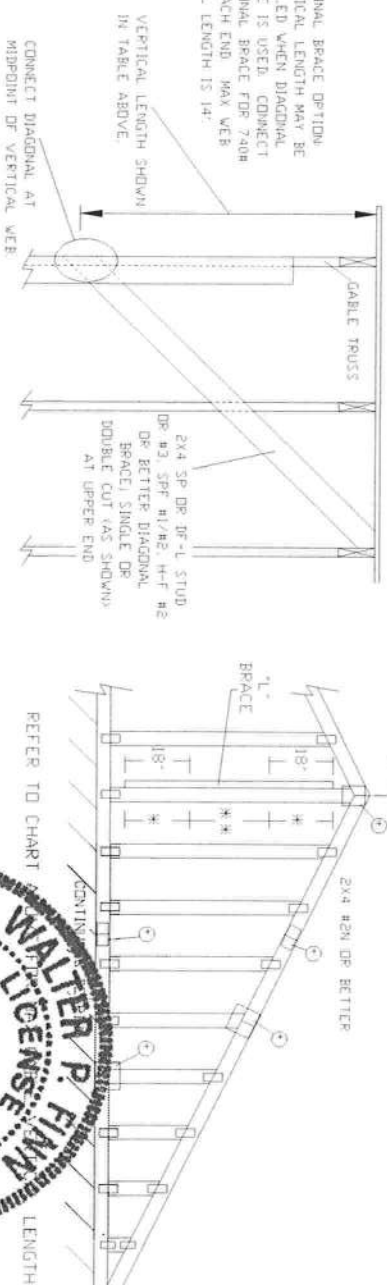
ATTACH EACH 1" BRACE WITH 100 NAILS  
(0.128"x3" min)

- \* FOP (1) 1" BRACE SPACE NAILS AT 2' OC
- IN 18" END ZONES AND 4' OC BETWEEN ZONES
- \* FOP (2) 1" BRACES SPACE NAILS AT 3' OC
- IN 18" END ZONES AND 6' OC BETWEEN ZONES

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

TABLE VERTICAL PLATE SIZES	
VERTICAL LENGTH	NO SPLICE
LESS THAN 4'-0"	1x4 DP 2x3
GREATER THAN 4'-0" BUT LESS THAN 11'-6"	3x4
GREATER THAN 11'-6"	3x4*

\* REFER TO COMMON TRUSS DESIGN FOR  
PEARL SPLICE, AND HEEL PLATES



Building Components Group Inc.

Building Components Group Inc

Earth City, MO 63045

[illegible]

No. 22839

STATE OF  
FLORIDA

PROFESSIONAL ENGINEER

MAX. TOT. LD. 60 PSF
MAX. SPACING 24.0"

REF	ASCE7-05-CAR12013
DATE	1/1/09
DRWG	A12015050109

BRACING GROUP SPECIES AND GRADES

Diagram illustrating the experimental design for the spruce-pine fir study. The design is a 2x2 factorial experiment with two groups (A and B) and two treatments (Spruce-Pine-Fir and Hem-Fir). Each treatment is further divided into two conditions (Stud and Standard). The groups are labeled 'NORTH' and 'SOUTH'.

GROUP	TREATMENT	CONDITION
GROUP A	SPRUCE-PINE-FIR	STUD
		STANDARD
	HEM-FIR	STUD
		STANDARD
GROUP B	SPRUCE-PINE-FIR	STUD
		STANDARD
	HEM-FIR	STUD
		STANDARD

GROUP B

HEM-LIP

#1 & BTR
#1

SOUTHERN PINE

#1
#2

DOUGLAS FIR-LARCH

#1
#2







COLUMBIA COUNTY BUILDING DEPARTMENT  
RESIDENTIAL CHECK LIST

MINIMUM PLAN REQUIREMENTS: FLORIDA BUILDING CODE RESIDENTIAL 2010 EFFECTIVE 15 MARCH 2012 AND THE NATIONAL ELECTRICAL 2008 EFFECTIVE 1 OCTOBER 2009

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

**ALL BUILDING PLANS MUST INDICATE COMPLIANCE WITH THE CURRENT 2010 FLORIDA BUILDING CODES RESIDENTIAL, EFFECTIVE 15 MARCH 2012. NATIONAL ELECTRICAL CODE 2008 EFFECTIVE 1 OCTOBER 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 FLORIDA BUILDING CODE FIGURE 1609-A THROUGH 1609-C ULTIMATE DESIGN WIND SPEEDS FOR RISK CATEGORY AND BUILDINGS AND OTHER STRUCTURES**

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:		✓		
2	All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void		✓		
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	✓		
5	Dimensions of all building set backs	✓		
6	Location of all other structures (include square footage of structures) on parcel, existing or proposed well and septic tank and all utility easements.	✓		
7	Provide a full legal description of property.	✓		

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

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
8	Plans or specifications must show compliance with FBCR Chapter 3	IIII	IIII	IIII
		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 <sup>2</sup> ), to be used for the design of exterior component, cladding materials not specifically 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 FBC 1405.13.2 where the opening of an operable window is located more than 72 inches above the finished grade or surface below, the lowest part of the clear opening of the window shall be a minimum of 24 inches above the finished floor of the room in which the window is located. Glazing between the floor and 24 inches shall be fixed or have openings through which a 4-inch-diameter sphere cannot pass.	✓		
25	Safety glazing of glass where needed	✓		
26	Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 and chapter 24 of FBCR)	✓		
27	Show stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails	✓		
28	Identify accessibility of bathroom (see FBCR SECTION 320)	✓		

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

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

### **FBCR 403: Foundation Plans**

		YES	NO	N/A
29	Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing.	✓		
30	All posts and/or column footing including size and reinforcing	✓		
31	Any special support required by soil analysis such as piling.			✓
32	Assumed load-bearing value of soil _____ Pound Per Square Foot	✓		
33	Location of horizontal and vertical steel, for foundation or walls (include # size and type) For structures with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an grounding electrode system. Per the National Electrical Code article 250.52.3	✓		

### **FBCR 506: CONCRETE SLAB ON GRADE**

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

### **FBCR 318: PROTECTION AGAINST TERMITES**

36	Indicate on the foundation plan if soil treatment is used for subterranean termite prevention or Submit other approved termite protection methods. <b>Protection shall be provided by registered termiticides</b>	✓		
----	---	---	--	--

### **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 302.6			✓
51	Provide live and dead load rating of floor framing systems (psf).	✓		

## **FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION**

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
52	Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls	✓		
53	Fastener schedule for structural members per table IRC 602.3 are to be shown	✓		
54	Show Wood structural panel's sheathing attachment to studs, joist, trusses, rafters and structural members, showing fastener schedule attachment on the edges & intermediate of the areas structural panel sheathing	✓		
55	Show all required connectors with a max uplift rating and required number of connectors and oc spacing for continuous connection of structural walls to foundation and roof trusses or rafter systems	✓		
56	Show sizes, type, span lengths and required number of support jack studs, king studs for shear wall opening and girder or header per IRC 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 802.1.6.1 Wood trusses	✓		
61	Include a layout and truss details, signed and sealed by Florida Professional Engineer	✓		
62	Show types of connector's assemblies' and resistance uplift rating for all trusses and rafters	✓		
63	Show gable ends with rake beams showing reinforcement or gable truss and wall bracing details	✓		
64	Provide dead load rating of trusses	✓		

## **FBCR 802:Conventional Roof Framing Layout**

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

## **FBCR 803 ROOF SHEATHING**

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

## **ROOF ASSEMBLIES FRC Chapter 9**

71	Include all materials which will make up the roof assembles covering	✓		
72	Submit Florida Product Approval numbers for each component of the roof assembles 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 <b>Mechanical exhaust capacity of 50 cfm intermittent or 20 cfm continuous required</b>	✓		
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 <b>Ground-Fault Circuit Interrupter (GFCI) Article 210.8 A</b>	✓		
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.  <b>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</b>	✓		

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 <b>Combination arc-fault circuit interrupter</b> , 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.

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

**THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS**

		YES	NO	N/A
92	<b>Building Permit Application</b> A current On-Line Building Permit Application <a href="http://www.ccpermit.com">www.ccpermit.com</a> is to be completed, by following the Checklist all supporting documents must be submitted. There is a <b>\$15.00</b> application fee.	✓		
93	<b>Parcel Number</b> The parcel number (Tax ID number) from the Property Appraisers Office (386) 758-1083 is required. A copy of property deed is also requested. <a href="http://www.columbiacountyfla.com">www.columbiacountyfla.com</a>	✓		
94	<b>Environmental Health Permit or Sewer Tap Approval</b> A copy of a approved Columbia County Environmental Health (386) 758-1058	✓		
95	<b>City of Lake City</b> A permit showing an approved waste water sewer tap 386-752-2031		✓	✓
96	<b>Toilet facilities shall be provided for all construction sites</b>	✓		
97	<b>Town of Fort White</b> (386) 497-2321 If the parcel in the application for building permit is within the Corporate city limits of Fort White, an approval land use development letter issued by the Town of Fort is required to be submitted with the application for a building permit.			✓
98	<b>Flood Information:</b> All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting a application to this office. Any project located within a flood zone where the base flood elevation (100 year flood) has been established shall meet the requirements of Section 8.5.2 of the Columbia County Land Development Regulations. Any project located within a flood zone where the base flood elevation has not been established (Zone A) shall meet the requirements of Section 8.5.3 of the Columbia County Land Development Regulations	✓		
99	<b>CERTIFIED FINISHED FLOOR ELEVATIONS</b> will be required on any project where the approved FIRM Flood Maps show the property is in a AE, Floodway, and AH flood zones. Additionally One Foot Rise letters are required for AE and AH zones. In the Floodway Flood zones a Zero Rise letter is required.	✓		
100	A Flood development permit is also required for AE, Floodway & AH. Development permit cost is <b>\$50.00</b>	✓		✓
101	<b>Driveway Connection:</b> If the property does not have an existing access to a public road, then an application for a culvert permit ( <b>\$25.00</b> ) must be made. County Public Works Dept. determines the size and length of every culvert before instillation and completes a final inspection before permanent power is granted. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver ( <b>\$50.00</b> ) Separate Check when issued. If the project is to be located on an F.D.O.T. maintained road, then an F.D.O.T. access permit is required.			✓
102	<b>911 Address:</b> An application for a 911 address must be applied for and <b>received</b> through the Columbia County Emergency Management Office of 911 Addressing Department (386) 758-1125 Ext. 3	✓		





• Engineering  
• Geotechnical  
• Environmental  
Laboratories

## Cal-Tech Testing, Inc.

P.O. Box 1625 • Lake City, FL 32056-1625 • Tel(386)766-3633 • Fax(386)762-6466  
450 SR 13 N., Suite 206, #308, Jacksonville, FL 32258 • Tel(904)381-8901 • Fax(904)381-8902

#30534

JOB NO.: 12-00344-01

### REPORT OF IN-PLACE DENSITY TEST

DATE TESTED: 11/16/12

DATE REPORTED: 11/21/12

PROJECT:	Pierce Kelly Residence, 126 Jule Bug, Ft. White, Florida
CLIENT:	Winter Group, Inc., PO Box 1984, Lake City, Florida 32056
GENERAL CONTRACTOR:	Winter Group, Inc.
EARTHWORK CONTRACTOR:	Winter Group, Inc.
INSPECTOR:	B. Slaughter
ASTM METHOD	SOIL USE
(D-2922) Nuclear	BUILDING FILL
SPECIFIED REQUIREMENTS: 95%	

TEST NO.	TEST LOCATION	TEST DEPTH	WET DENSITY (lb/ft <sup>3</sup> )	MOISTURE PERCENT	DRY DENSITY (lb/ft <sup>3</sup> )	PROCTOR TEST NO.	PROCTOR VALUE	MAXIMUM DENSITY
1	Approximate Center	0-12"	107.8	5.3	102.4	1	104.0	98%
2	5' Northwest of Southeast Corner of Pad	0-12"	107.0	5.4	101.5	1	104.0	98%
3	5' Southeast of Northwest Corner of Pad	0-12"	105.8	5.4	100.2	1	104.0	96%

REMARKS: The Above Tests Meet Specified Requirements.

PROCTORS				
PROCTOR NO.	SOIL DESCRIPTION	MAXIMUM DRY UNIT WEIGHT (lb/ft <sup>3</sup> )	OPT. MOIST.	TYPE
1	Tan Fine Sand with Silt (SP-SM)	104.0	<13.0	MODIFIED (ASTM D-1557)

Respectfully Submitted,  
CAL-TECH TESTING, INC.

*Linda M. Creamer, CEO, DBE*  
Linda M. Creamer  
President - CEO



The test results presented in this report are specific only to the samples tested at the time of testing. The tests were performed in accordance with generally accepted methods and standards. Since material conditions can vary between test locations and change with time, sound judgement should be exercised in the use and interpretation of the data. This report shall not be reproduced without prior approval of the author.

# COLUMBIA COUNTY OFFICE OF CIVIL ENGINEERING

## 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 26-6S-15-00821-000 Building permit No. 000030534

Use Classification SFD/UTILITY Fire: 44.94

Permit Holder TRACY WINTERS Waste: 117.25

Owner of Building ROBERT KELLEY Total: 162.19

Location: 126 SW JULBUG GLN, FORT WHITE, FL 32038

Date: 03/25/2013



*Key Cur*

Building Inspector

POST IN A CONSPICUOUS PLACE  
(Business Places Only)

FAX TO: LORI 758-2160  
12/26/12

30534

36408

## SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER F-623-12-006CONTRACTOR TRACY WINTERSPHONE 386-623-4969

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	Print Name <u>McDermott Electric, Inc.</u>	Signature <u>[Signature]</u>	Phone #: <u>386 935 0444</u>
	License #: <u>ER13013004</u>		
MECHANICAL/ A/C	Print Name <u>DAVID HALL</u>	Signature <u>David Hall (owner)</u>	Phone #: <u>755-9792</u>
	License #: <u>LN/8</u>		
PLUMBING/ GAS	Print Name _____	Signature _____	Phone #: _____
	License #: _____		
ROOFING	Print Name _____	Signature _____	Phone #: _____
	License #: _____		
SHEET METAL	Print Name _____	Signature _____	Phone #: _____
	License #: _____		
FIRE SYSTEM/ SPRINKLER	Print Name _____	Signature _____	Phone #: _____
	License #: _____		
SOLAR	Print Name _____	Signature _____	Phone #: _____
	License #: _____		

Specialty License	License Number	Sub-Contractor Print Name	Sub-Contractor Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO	<u>Joe Amos</u>	<u>386-466-2630</u>	<u>[Signature]</u>
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 6/09

ROBERT KELLEY  
126 SW Tulbug Glen  
Ft. White, FL 32038



Pierce Kelley / 126 Jul Bug Glen, Ft. White

## SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

30534

CONTRACTOR

TRACY WINTERS

PHONE

386.623.4969

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.

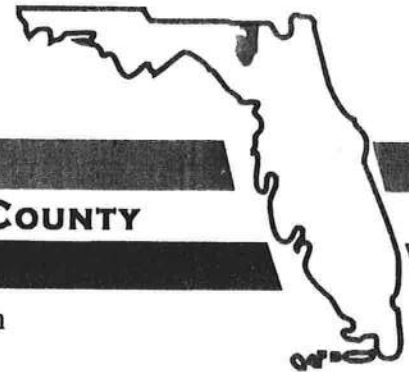
<b>ELECTRICAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>MECHANICAL/ A/C</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>PLUMBING/ GAS</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>ROOFING</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SHEET METAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>FIRE SYSTEM/ SPRINKLER</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SOLAR</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION	000240	Will Sikes	Will Sikes
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.

District No. 1 - Ronald Williams  
District No. 2 - Rusty DePratter  
District No. 3 - Bucky Nash  
District No. 4 - Stephen E. Bailey  
District No. 5 - Scarlet P. Frisina

30534



## BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

### Memo of review for correctness and completion

In accordance with participation in the NFIP/CRS program, all elevation certificates are required to be reviewed for correctness and completion prior to acceptance by the community. This form shall be attached to all elevation certificates maintained on file and provided with requested copies of elevation certificates.

- \_\_\_\_\_ The attached certificate requires correction by the surveyor of section (s) \_\_\_\_\_ prior to acceptance by the community.
- ✓ \_\_\_\_\_ The attached elevation certificate is complete and correct.
- \_\_\_\_\_ Minor corrections have been made in the below marked section(s) by the authorized Community Official.

#### SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		Policy Number
City		Company NAIC Number
State		ZIP Code
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)		
A5. Latitude/Longitude: Lat. _____ Long. _____		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number _____		
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) _____ sq ft		a) Square footage of attached garage _____ sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq in		c) Total net area of flood openings in A9.b _____ sq in

#### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number		B2. County Name		B3. State	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input type="checkbox"/> No					

Comments: \_\_\_\_\_

Date of Review: 25 MARCH 2013

Community Official: B. J. [Signature]

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

BOARD MEETS FIRST THURSDAY AT 7:00 P.M.  
AND THIRD THURSDAY AT 7:00 P.M.



# ELEVATION CERTIFICATE


IMPORTANT: Follow the instructions on pages 1-9.

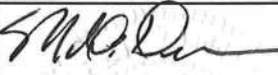
OMB No. 1660-0008  
Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>ROBERT PIERCE KELLY</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>126 SW JULEBUG GLEN</b>		Company NAIC Number:
City <b>FT. WHITE</b>	State <b>FL</b>	ZIP Code <b>32038</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>LOT 98, "THREE RIVERS ESTATES, UNIT 10", PLAT BOOK 6, PAGE 10. TAX PARCEL NO. 00-00-00-00821-000</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>RESIDENTIAL</b>		
A5. Latitude/Longitude: Lat. <b>N 29D55'58.3"</b> Long. <b>W 082D46'55.2"</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <b>5</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>NA</b> sq ft		a) Square footage of attached garage <b>NA</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>NA</b>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>NA</b>
c) Total net area of flood openings in A8.b <b>NA</b> sq in		c) Total net area of flood openings in A9.b <b>NA</b> sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>COLUMBIA COUNTY, FLORIDA 120070</b>		B2. County Name <b>COLUMBIA</b>		B3. State <b>FL</b>	
B4. Map/Panel Number <b>12023C0466</b>	B5. Suffix <b>C</b>	B6. FIRM Index Date <b>01/06/1988</b>	B7. FIRM Panel Effective/Revised Date <b>02/04/2009</b>	B8. Flood Zone(s) <b>AE FW</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>33.6</b>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input checked="" type="checkbox"/> Other/Source: <b>SUWANNEE RIVER WATER MANAGEMENT DISTRICT</b>					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: ____ / ____ / ____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.	
C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>PRIVATE BM FROM USGS BM</b> Vertical Datum: <b>NAVD 88 ADJUSTED FROM NGVD 29</b> Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>36 . 83</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<b>NA</b> <input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<b>NA</b> <input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<b>NA</b> <input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>35 . 2</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>25 . 6</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>27 . 6</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<b>27 . 4</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION			
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.			
<input type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>MARK D. DUREN</b>		License Number <b>LS4708</b>	
Title <b>FLORIDA LICENSED SURVEYOR AND MAPPER</b>		Company Name <b>MARK D. DUREN AND ASSOCIATES, INC.</b>	
Address <b>1604 SW SISTERS WELCOME ROAD</b>		City <b>LAKE CITY</b>	State <b>FL</b>
Signature 		ZIP Code <b>32025</b>	Telephone <b>(386) 758-9831</b>
Date <b>03/15/2013</b>			

  
**LS4708**  
PLACE  
**3/15/2013**  
SEAL  
HERE  
**W13-056R.**



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 126 SW JULEBUG GLEN			Policy Number:
City FT. WHITE	State FL	ZIP Code 32038	Company NAIC Number:

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments LINE C2e IS A/C PLATFORM. BOTTOM OF ELECTRIC METER SOCKET IS EL. 32.65'. BOTTOM OF "ON DEMAND" HOT WATER HEATER IS EL. 30.55'. FRAME DWELLING ON WOOD PIERS WITH CONCRETE SLAB UNDERNEATH, NO ENCLOSURES. WOOD STEPS AND DECK. SLAB ELEVATION IS 27.75'+/- . AREA UNDER DWELLING APPEARS TO BE FOR STORAGE AND PARKING ONLY.

Signature



Date 03/15/2013

**SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

**SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

☐ Check here if attachments.**SECTION G – COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (Items G4–G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------	------------------------	---

G7. This permit has been issued for: ☐ New Construction ☐ Substantial ImprovementG8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_

Local Official's Name Title

Community Name Telephone

Signature Date

Comments

☐ Check here if attachments.

## BUILDING PHOTOGRAPHS

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 126 SW JULEBUG GLEN			Policy Number:
City FT. WHITE	State FL	ZIP Code 32038	Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

FRONT AND RIGHT SIDE VIEW (NORTH AND WEST) MARCH 1, 2013



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 126 SW JULEBUG GLEN			Policy Number:
City FT. WHITE	State FL	ZIP Code 32038	Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

REAR AND RIGHT SIDE VIEW (SOUTH AND WEST) MARCH 1, 2013





# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name **ROBERT PIERCE KELLY**

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
**126 SW JULEBUG GLEN**

Company NAIC Number:

City **FT. WHITE**

State **FL**

ZIP Code **32038**

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

**LOT 98, "THREE RIVERS ESTATES, UNIT 10", PLAT BOOK 6, PAGE 10. TAX PARCEL NO. 00-00-00-00821-000**

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **RESIDENTIAL**

A5. Latitude/Longitude: Lat. **N 29D55'58.3"**

Long. **W 082D46'55.2"**

Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number **5**

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) **NA** sq ft

b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade **NA**

c) Total net area of flood openings in A8.b **NA** sq in

d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:

a) Square footage of attached garage **NA** sq ft

b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade **NA**

c) Total net area of flood openings in A9.b **NA** sq in

d) Engineered flood openings? ☐ Yes ☒ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
**COLUMBIA COUNTY, FLORIDA 120070**

B2. County Name  
**COLUMBIA**

B3. State  
**FL**

B4. Map/Panel Number

B5. Suffix

B6. FIRM Index Date

B7. FIRM Panel Effective/ Revised Date

B8. Flood Zone(s)

B9. Base Flood Elevation(s) (Zone AO, use base flood depth)

**12023C0466**

**C**

**01/06/1988**

**02/04/2009**

**AE FW**

**33.6**

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:

☐ FIS Profile ☐ FIRM ☐ Community Determined ☒ Other/Source: **SUWANNEE RIVER WATER MANAGEMENT DISTRICT**

B11. Indicate elevation datum used for BFE in Item B9:

☐ NGVD 1929

☒ NAVD 1988

☐ Other/Source:

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?

☐ Yes ☒ No

Designation Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ ☐ CBRS ☐ OPA

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings\* ☐ Building Under Construction\* ☒ Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: **PRIVATE BM FROM USGS BM**

Vertical Datum: **NAVD 88 ADJUSTED FROM NGVD 29**

Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source:

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) **36 . 83**

☒ feet ☐ meters

b) Top of the next higher floor **NA**

☐ feet ☐ meters

c) Bottom of the lowest horizontal structural member (V Zones only) **NA**

☐ feet ☐ meters

d) Attached garage (top of slab) **NA**

☐ feet ☐ meters

e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) **33 . 0**

☒ feet ☐ meters

f) Lowest adjacent (finished) grade next to building (LAG) **25 . 6**

☒ feet ☐ meters

g) Highest adjacent (finished) grade next to building (HAG) **27 . 6**

☒ feet ☐ meters

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support **27 . 4**

☒ feet ☐ meters

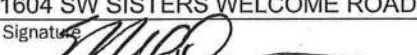
## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

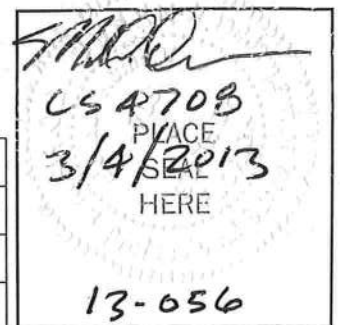
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

☐ Check here if comments are provided on back of form.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

☐ Check here if attachments.

Certifier's Name <b>MARK D. DUREN</b>	License Number <b>LS4708</b>
Title <b>FLORIDA LICENSED SURVEYOR AND MAPPER</b>	Company Name <b>MARK D. DUREN AND ASSOCIATES, INC.</b>
Address <b>1604 SW SISTERS WELCOME ROAD</b>	City <b>LAKE CITY</b>
State <b>FL</b>	ZIP Code <b>32025</b>
Signature 	Date <b>03/04/2013</b>
	Telephone <b>(386) 758-9831</b>



# ELEVATION CERTIFICATE, page 2

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 126 SW JULEBUG GLEN			Policy Number:	
City FT. WHITE	State FL	ZIP Code 32038	Company NAIC Number:	

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments LINE C2e IS A/C PLATFORM. BOTTOM OF ELECTRIC METER SOCKET IS EL. 32.65'. BOTTOM OF "ON DEMAND" HOT WATER HEATER IS EL. 30.55'. FRAME DWELLING ON WOOD PIERS WITH CONCRETE SLAB UNDERNEATH, NO ENCLOSURES. WOOD STEPS AND DECK. SLAB ELEVATION IS 27.75'+/-. AREA UNDER DWELLING APPEARS TO BE FOR STORAGE AND PARKING ONLY.

Signature  Date 03/04/2013

## SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ . \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

## SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

☐ Check here if attachments.

## SECTION G – COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (Items G4–G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
G7. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building:	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____
G9. BFE or (in Zone AO) depth of flooding at the building site:	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____
G10. Community's design flood elevation:	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____

Local Official's Name	Title
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments.

SITE PLAN  
IN SECTION 26,  
TOWNSHIP 6 SOUTH,  
RANGE 15 EAST.  
COLUMBIA COUNTY, FLA.

DESCRIPTION:  
LOT 98 OF THREE RIVERS ESTATES UNIT NO. 10, ACCORDING  
TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 6,  
PAGE(S) 10, OF THE PUBLIC RECORDS OF COLUMBIA COUNTY,  
FLORIDA.

COLUMBIA COUNTY PROPERTY APPRAISER'S TAX PARCEL  
IDENTIFICATION NO. 00-00-00-00821-000.

ACCORDING TO A PRIOR TOPOGRAPHIC SURVEY OF THIS LOT BY WILLIAM N.  
KITCHEN, DATED 11/22/2006, THE GROUND ELEVATION AT THE PROPOSED  
LOCATION OF THE DWELLING IS 27'±. GROUND ELEVATION AT PROPOSED SEPTIC  
TANK IS ABOUT 29'± AS PER KITCHEN SURVEY. (DATUM NOT GIVEN, PROBABLY  
NATIONAL GEODETIC VERTICAL DATUM OF 1929)(NGVD 1929). THE CURRENT  
DATUM USED BY THE FEMA AND THE LOCAL REGULATORY AGENCIES IS THE  
NORTH AMERICAN VERTICAL DATUM OF 1988 (NAVD 1988). NAVD 1988 DATUM  
MAY BE OBTAINED BY SUBTRACTING 0.84 FEET FROM NGVD 1929 DATUM AS  
PER THE CURRENT FEMA FLOOD INSURANCE RATE MAPS.

SUWANNEE RIVER WATER MANAGEMENT DISTRICT EFFECTIVE FLOOD INFORMATION  
REPORT:  
(FEMA FLOOD INSURANCE RATE MAP DATED FEBRUARY 4, 2012, PANEL NO.  
12023C0466C)

FLOOD ZONE: AE FW (FLOOD ZONE AE AND IN THE REGULATORY FLOODWAY OF  
THE SANTA FE RIVER)

1% ANNUAL CHANCE (100 YEAR) FLOOD ELEVATION=33.6' (NAVD 1988 DATUM)  
10% ANNUAL CHANCE (10 YEAR) FLOOD ELEVATION=27.7' (NAVD 1988 DATUM)  
50% ANNUAL CHANCE (2 YEAR) FLOOD ELEVATION=22.1' (NAVD 1988 DATUM)

ACCORDING TO THE SUWANNEE RIVER WATER MANAGEMENT DISTRICT THE  
LOWEST HORIZONTAL STRUCTURAL MEMBER OF THE FINISHED FLOOR MUST BE 1  
FOOT ABOVE THE 1% ANNUAL CHANCE (100 YEAR) BASE FLOOD ELEVATION.

#### SURVEYOR'S NOTES:

1. BOUNDARY BASED ON DIMENSIONS SHOWN ON PLAT OF RECORD.
2. BEARINGS BASED ENTIRELY ON PLAT OF RECORDS (NO FIELD WORK  
UNDERTAKEN BY THIS OFFICE).

PREPARED FOR:  
ROBERT PIERCE KELLEY

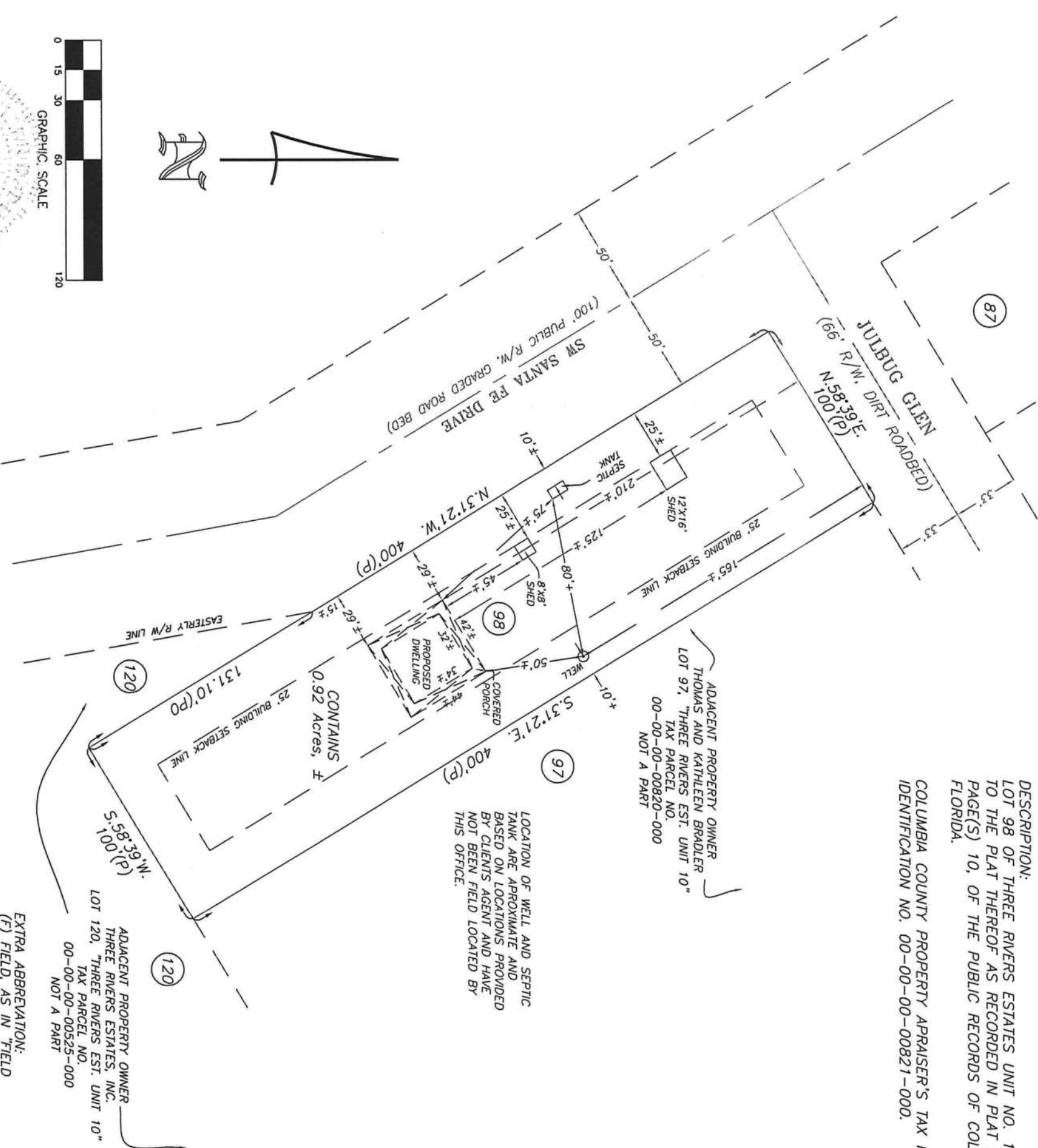
JOB SITE ADDRESS:  
126 SW JULBUG GLEN  
FT. WHITE, FL 32038

#### SYMBOL LEGEND

- O.R.I. OFFICIAL RECORD INSTRUMENT
- CONCRETE MONUMENT SET, LS 4708
- IRON PIN OR PIPE FOUND
- 5/8" IRON ROD SET, LS 4708
- x— WIRE FENCE
- E— ELECTRIC UTILITY LINE (OVERHEAD)
- UG— UNDERGROUND ELECTRIC SERVICE
- CV— CABLE TV LINE (OVERHEAD)
- o— CHAIN LINK FENCE
- o— WOODEN FENCE
- o— CORRUGATED METAL PIPE
- o— RCP REINFORCED CONCRETE PIPE
- o— LAND SURVEYOR
- o— LB LICENSED BUSINESS
- o— ORB OFFICIAL RECORD BOOK
- o— PRM PERMANENT REFERENCE MONUMENT
- o— PCP PERMANENT CONTROL POINT
- ⊗ UTILITY POLE
- ⊙ RIGHT-OF-WAY
- o— NO ID.
- o— FLA. D.O.T.
- o— C.M.
- o— I.R.
- o— I.P.

MARK D. DUREN AND  
ASSOCIATES, INC.  
LB 7620  
1604 SW SISTERS WELCOME ROAD  
LAKE CITY, FLA. 32025  
(386) 758-9831 OFFICE  
(386) 758-8010 FAX

FIELD SURVEY DATE: N/A  
DATE DRAWN: SEPTEMBER 5, 2012  
FOR: KELLEY  
FIELD BOOK: N/A PAGE:         
DRAWN BY: M. DUREN  
WO# 12-201



SIGNED: Mark D. Duren  
MARK D. DUREN, LS 4708