DATE 12/11/2009

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000028264

APPLICANT TRENT GIEBEIG PHONE 397-0545

ADDRESS 697 SE HOLLY TERR. LAKE CITY FL 32025

OWNER LEMMIE & MARY CAMPBELL PHONE 454-2124

ADDRESS 169 SW TIMUQUA TERR. FT. WHITE FL 32038

CONTRACTOR TRENT GIEBEIG PHONE 397-0545

LOCATION OF PROPERTY 47S, TL 27, TL TIMUQUA TERR, 1ST LOT ON RIGHT

TYPE DEVELOPMENT SFD,UTILITY ESTIMATED COST OF CONSTRUCTION 148800.00

HEATED FLOOR AREA 2054.00 TOTAL AREA 2976.00 HEIGHT ___ STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 7/12 FLOOR SLAB

LAND USE & ZONING A-3 MAX. HEIGHT ___

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

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

PARCEL ID 11-7S-16-04182-955 SUBDIVISION REDFIELD

LOT 5 BLOCK ___ PHASE ___ UNIT ___ TOTAL ACRES 4.10

Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor	
		RR28281153		
EXISTING	09-526	BK	HD	Y
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: LEGAL LOT OF RECORD, ONE FOOT ABOVE THE ROAD, NOC ON FILE

Check # or Cash 5291

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power ___ date/app. by Foundation ___ date/app. by Monolithic ___ date/app. by

Under slab rough-in plumbing ___ date/app. by Slab ___ date/app. by Sheathing/Nailing ___ date/app. by

Framing ___ date/app. by Insulation ___ date/app. by

Rough-in plumbing above slab and below wood floor ___ date/app. by Electrical rough-in ___ date/app. by

Heat & Air Duct ___ date/app. by Peri. beam (Lintel) ___ date/app. by Pool ___ date/app. by

Permanent power ___ date/app. by C.O. Final ___ date/app. by Culvert ___ date/app. by

Pump pole ___ date/app. by Utility Pole ___ date/app. by M/H tie downs, blocking, electricity and plumbing ___ date/app. by

Reconnection ___ date/app. by RV ___ date/app. by Re-roof ___ date/app. by

BUILDING PERMIT FEE $ 745.00 CERTIFICATION FEE $ 14.88 SURCHARGE FEE $ 14.88

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

FLOOD DEVELOPMENT FEE $ ___ FLOOD ZONE FEE $ 25.00 CULVERT FEE $ ___ **TOTAL FEE** 849.76

INSPECTORS OFFICE Hale Edden CLERKS OFFICE CH

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

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

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

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

CK 5291

Columbia County Building Permit Application

For Office Use Only Application # 0912-03 Date Received 12/3 By JW Permit # 28264

Zoning Official BLK Date 04.12.09 Flood Zone X Land Use A-3 Zoning A-3

FEMA Map # N/A Elevation N/A MFE/ Above Rd River N/A Plans Examiner ND Date 12-11-09

Comments Legal lot of Record

☑ NOC ☑ EH ☑ Deed or PA ☑ Site Plan ☐ State Road Info ☐ Parent Parcel #

☐ Dev Permit # ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter

IMPACT FEES: EMS Fire Corr Road/Code

School = TOTAL Ø N/A suspended

Septic Permit No. 09-0526 Fax 386-754-9601

Name Authorized Person Signing Permit Trent Giebeig Phone 386-397-0545

Address 697 SE Holly Terrace Lake City FL 32025

Owners Name Lemmie Campbell Phone 454-2124

911 Address 169 SW Timugua Terrace Fort White, FL 32038

Contractors Name Trent Giebeig Construction Inc Phone 386-397-0545

Address 697 SE Holly Terrace Lake City FL 32025

Fee Simple Owner Name & Address Lemmie + Mary Campbell PO Box 781 Ft White 32038

Bonding Co. Name & Address N/A

Architect/Engineer Name & Address Freeman Design Group

Mortgage Lenders Name & Address First Federal Bank of Florida PO Box 2029 Lake City FL 32056

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

Property ID Number 11-7S-16-04182-955 Estimated Cost of Construction 150,000

Subdivision Name Redfield Lot 5 Block — Unit — Phase —

Driving Directions Hwy 47 South to Ft White TL on Hwy 27 Go to SW Timugua Terrace TL First lot on Right Number of Existing Dwellings on Property — 0 —

Construction of wood frame – Brick SFD Total Acreage 4.100 Lot Size

Do you need a - Culvert Permit or Culvert Waiver or (Have an Existing Drive) Total Building Height 19'1"

Actual Distance of Structure from Property Lines - Front 312.6 Side 145.0 Side 151.0 Rear 120.0

Number of Stories 1 Heated Floor Area 2054 Total Floor Area 2976 Roof Pitch 7/12

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction. **CODE:** Florida Building Code 2007 with 2009 Supplements and the 2008 National Electrical Code.

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

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

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

(Owners Must Sign All Applications Before Permit Issuance.)

Lemmie Campbell Mary S. Campbell
Owners Signature ****OWNER BUILDERS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.**

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

Contractor's Signature (Permitee)

Contractor's License Number RR282811523
Columbia County
Competency Card Number 000141

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 30th **day of** Nov **20** 09.

Personally known X **or Produced Identification**

Elaine K. Tolar
State of Florida Notary Signature (For the Contractor)

SEAL: Notary Public State of Florida
Elaine K Tolar
My Commission DD918601
Expires 10/02/2013

This Instrument Prepared By:
Michael H. Harrell
Abstract & Title Services, Inc.
PO Box 7175
Lake City, Florida 32055
ATS# 17748

Inst:200912019970 Date:12/2/2009 Time:2:03 PM
Doc Stamp-Deed:413.00
DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1185 P:46

GENERAL WARRANTY DEED

Individual to Individual (or Corporation/LLC)

This Warranty Deed made this 2nd day of December, 2009 by

Anthony W. Labay, and his wife, Barbara C. Labay

hereinafter called the Grantor, to

Lemmie Campbell, and his wife, Mary L. Campbell

whose post office address is PO Box 781, Fort White, FL 32038, hereinafter called the Grantee.

(Wherever used herein the terms "Grantor" and "Grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of Individuals, and the successors and assigns of Corporation.)

The Grantor, for and in consideration of the sum of $10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, unto the Grantee all that certain land, situate in Columbia County, Florida, viz: TAX ID: R04182-955 :

Lot 5 of REDFIELD SUBDIVISION, a subdivision as per the Plat thereof as recorded in Plat Book 6, Page(s) 37-37A, of the Public Records of Columbia County, Florida.

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

To have and to hold, the same in fee simple forever.

And the Grantor hereby convenants with said Grantee that the Grantor is lawfully seized of said land in fee simple; that the

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Trent Giebeig PHONE 397-0545

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 Conner Electric, Inc. License #: ER 13013192	Signature Michael S. Co Phone #: 386-397-0909
MECHANICAL/ A/C _____	Print Name Booze' H.T.U License #: RA0035027	Signature Lana Booz Phone #:
PLUMBING/ GAS	Print Name Ken Roche License #: CFC1426527	Signature Ken Roche Phone #:
ROOFING update C	Print Name Windtech Contracting Corp License #: CCC053270	Signature W.E. Ward Phone #: 386 755 8699
SHEET METAL	Print Name License #: X	Signature Phone #:
FIRE SYSTEM/ SPRINKLER	Print Name License#: X	Signature Phone #:
SOLAR	Print Name License #: X	Signature Phone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON	000097	Kenneth Loudermilk	Kenneth Loudermilk
CONCRETE FINISHER	000218	Tony E. Jordan	TONY E. JORDAN, SR
FRAMING	RG0066597	John D Morris	John D Morris
INSULATION	000240	Will W. Sikes	Will W Sikes
STUCCO	X	—	
DRYWALL	000621	JESSE AMBROS	Jesse Ambros
PLASTER	X	—	
CABINET INSTALLER	RR282811523	Trent Giebeig Const	Trent Giebeig 000141
PAINTING	RR282811523	Trent Giebeig Const.	Trent Giebeig 000141
ACOUSTICAL CEILING	X	—	
GLASS	000618	Carl Bullard Jr	Carl Bullard Jr
CERAMIC TILE	000071	JESSE BOCANEGRA	Jesse Bocanegra
FLOOR COVERING	000710	Marc A Vann	Marc A Vann
ALUM/VINYL SIDING	000312	Paul Phinney	Paul Phinney
GARAGE DOOR	000619	Carl Bullard Jr	Carl Bullard Jr
METAL BLDG ERECTOR	X		

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.

Columbia County Property Appraiser

DB Last Updated: 11/13/2009

2009 Tax Year

Parcel: 11-7S-16-04182-955

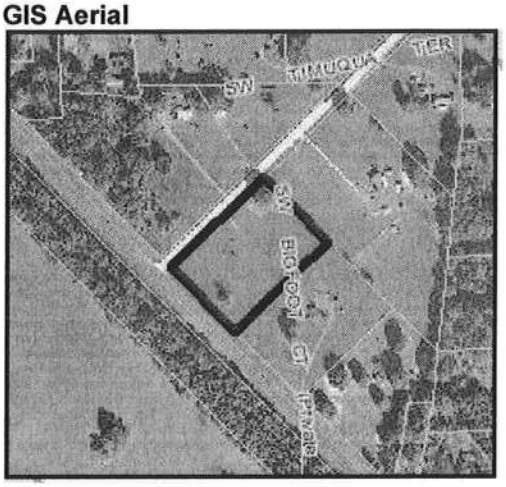
Tax Record | Property Card | Interactive GIS Map | Print

Search Result: 1 of 1

Owner & Property Info

Owner's Name	LABAY ANTHONY W & BARBARA C		
Site Address	TIMUQUA		
Mailing Address	15865 NW 245TH DR HIGH SPRINGS, FL 32643		
Use Desc. (code)	VACANT (000000)		
Neighborhood	012716.04	**Tax District**	3
UD Codes	MKTA02	**Market Area**	02
Total Land Area	4.100 ACRES		
Description	LOT 5 REDFIELD S/D. ORB 792-2831, 839-1392, 947-03, WD 1001-549.		

GIS Aerial



Property & Assessment Values

Mkt Land Value	cnt: (2)	$30,044.00
Ag Land Value	cnt: (0)	$0.00
Building Value	cnt: (0)	$0.00
XFOB Value	cnt: (0)	$0.00
Total Appraised Value		$30,044.00

Just Value	$30,044.00
Class Value	$0.00
Assessed Value	$30,044.00
Exemptions	$0.00
Total Taxable Value	County: $30,044.00 | City: $30,044.00 Other: $30,044.00 | School: $30,044.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
11/25/2003	1001/549	WD	V	Q		$25,000.00
1/29/2002	947/3	QC	V	U	01	$100.00
5/14/1997	839/1392	WD	V	Q		$18,000.00
7/12/1994	792/2831	WD	V	Q		$14,500.00

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)	0000004.100 AC	1.00/1.00/0.80/1.00	$6,840.00	$28,044.00
009945	WELL/SEPT (MKT)	0000001.000 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	$2,000.00	$2,000.00

Columbia County Property Appraiser DB Last Updated: 11/13/2009

COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT

P. O. Box 1787, Lake City, FL 32056-1787
Telephone: (386) 758-1125 * Fax: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

ADDRESS ASSIGNMENT DATA

The Columbia County Board of County Commissioners has passed Ordinance 2001-9, which provides for a uniform numbering system. A copy of this ordinance is available in the Clerk of Court records, located in the courthouse. This new numbering system will increase the efficiency of POLICE, FIRE AND EMERGENCY MEDICAL vehicles responding to calls within Columbia County by immediately identifying the location of the caller.

A Residential or Other Structure(s) on Parcel Number:
11-7S-16-04182-955 (LOT 5 REDFIELD S/D)

Address Assignment(s):
169 SW TIMUQUA TER, FORT WHITE, FL, 32038

Any questions concerning this information should be referred to the Columbia County 911 Addressing / GIS Department at the address or telephone number above.

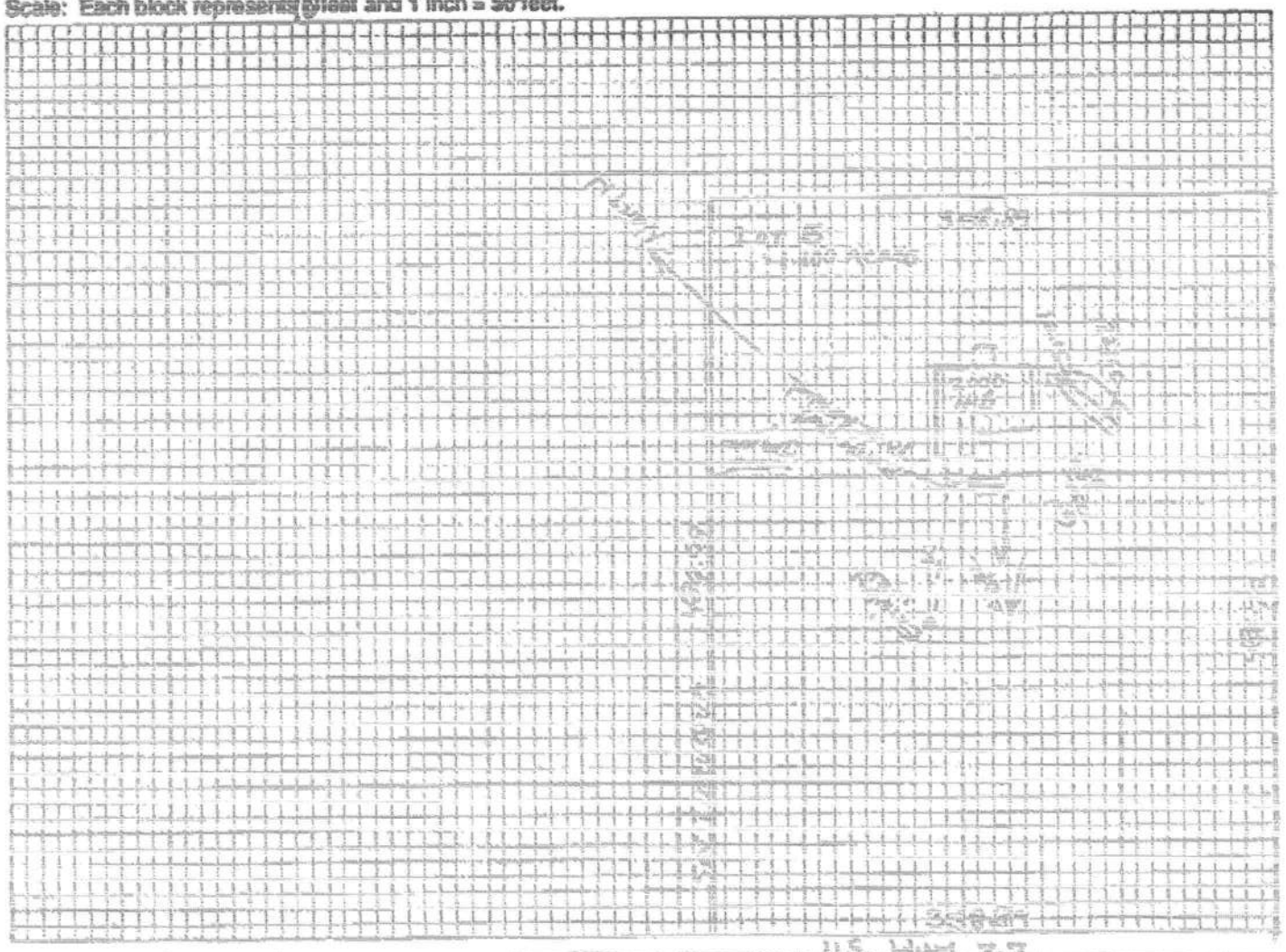
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 09-0526

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = ~~50~~ 50 feet.



Notes: Anthony Lacey
(Leannie Campbell)
Lot 5 Red Oak 4.100 Acres
04182-955

Site Plan submitted by: Robert Ard Signature Agent Title

Plan Approved ✓ Not Approved Date 10/24/09

By Scott Ard - Columbia - Fl Director County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, Site Plan Part II (Form 4015 which may be used)
(Back Number: 0744-002-4015-0)

Water Wells
Pumps & Service

Phone: (386) 752-6677
Fax: (386) 752-1477

Lynch Well Drilling, Inc.
173 SW Young Place
Lake City, FL 32025
www.lynchwelldrilling.com

November 6, 2007

To Whom It May Concern:

As required by building code regulations for Columbia County in order that a building permit can be issued, the following well information is provided with regard to the above-referenced well:

Size of Pump Motor:	1 Horse Power
Size of Pressure Tank:	81-Gallon Bladder Tank
Cycle Stop Valve Used:	No

Should you require any additional information, please contact us.

Sincerely,

Linda Newcomb

Linda Newcomb
Lynch Well Drilling, Inc.

ATS# 2-17789

This Instrument Prepared By:
Michael H. Harrell
Abstract & Title Services, Inc.
PO Box 7175
Lake City, Florida 32055

NOTICE OF COMMENCEMENT

TO WHOM IT MAY CONCERN:

The undersigned hereby give notice that improvements will be made to certain real property and in accordance with Chapter 713.13, Florida Statues, the following is provided in this Notice of Commencement:

1. Construction of Single Family Dwelling, to be made to real property located at 169 SW Timuqua Terrace, Fort White, Florida 32038, more particularly described as :

   LOT 5 OF REDFIELD SUBDIVISION, A SUBDIVISION AS PER THE PLAT THEREOF AS RECORDED IN PLAT BOOK 6, PAGE(S) 37-37A, OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA.

2. The name and address of the undersigned owner is: Lemmie Campbell, and his wife, Mary L. Campbell, PO Box 781, Fort White, FL 32038.

3. The name and address of the contractor is: Trent Giebeig Construction, Inc., 462 SW Fairlington Court, Lake City, FL 32025.

4. The name and address of surety bond is: N/A

5. LENDER: First Federal Bank of Florida, P.O. Box 2029, Lake City, Florida 32056.

6. Persons within the State of Florida designated by Owner upon whom notices of other documents may be served as provided in Section 713.13(1)a.7., Florida Statutes: NONE

7. In addition to himself, Owner designates Paula Hacker, P.O. Box 2029, Lake City, Florida 32056, is also designated to receive a copy of the Lienor's Notice as provided in Section 713.06(2)(b) Florida Statutes.

8. Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is specified).

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

***Owner is used for singular or plural as context requires.**

Signed, sealed and delivered in the presence:

Traci Landry — WITNESS Traci Landry
Lemmie Campbell — Lemmie Campbell

Donna Cox — WITNESS Donna Cox
Mary L. Campbell — Mary L. Campbell

STATE OF FLORIDA
COUNTY OF COLUMBIA

Before me, personally appeared Lemmie Campbell, and his wife, Mary L. Campbell, to me known to be the person(s) described in and who executed the foregoing instrument, and they acknowledged to and before me that they executed said instrument for the purpose therein expressed.

Witness my hand and official seal this 2nd day of December, 2009

DONNA COX
Notary Public, State of Florida
My Comm. Expires Jan. 16, 2010
Commission No. DD 507061
Bonded Thru Notary Public Underwriters

Donna Cox
NOTARY PUBLIC

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.

Lemmie Campbell
Signature of Natural Person Signing Above

CLERK CIRCUIT COURT COLUMBIA COUNTY, FLORIDA

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: Donna Cox
Deputy Clerk
Date: Dec 2, 2009

FORM 1100A-08

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs Residential Performance Method A

Project Name:	Campbell Residence	Builder Name:	Trent Geibeig.
Street:	Timuqua	Permit Office:	Columbia
City, State, Zip:	Lake City , FL ,	Permit Number:	28264
Owner:	Lemmie and Mary Campbell	Jurisdiction:	221000
Design Location:	FL, Gainesville		

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	4
5. Is this a worst case?	No
6. Conditioned floor area (ft²)	2054

7. Windows	Description	Area
a. U-Factor:	Sgl, U=0.55	174.00 ft²
SHGC:	SHGC=0.60	
b. U-Factor:	N/A	ft²
SHGC:		
c. U-Factor:	N/A	ft²
SHGC:		
d. U-Factor:	N/A	ft²
SHGC:		
e. U-Factor:	N/A	ft²
SHGC:		

8. Floor Types	Insulation	Area
a. Slab-On-Grade Edge Insulation	R=0.0	2054.00 ft²
b. N/A	R=	ft²
c. N/A	R=	ft²

9. Wall Types	Insulation	Area
a. Frame - Wood, Exterior	R=13.0	1701.00 ft²
b. N/A	R=	ft²
c. N/A	R=	ft²
d. N/A	R=	ft²

10. Ceiling Types	Insulation	Area
a. Under Attic (Vented)	R=30.0	2054.00 ft²
b. N/A	R=	ft²
c. N/A	R=	ft²

11. Ducts
a. Sup: Attic Ret: Attic AH: Interior Sup. R= 6, 410.8 ft²

12. Cooling systems
a. Central Unit — Cap: 42.0 kBtu/hr, SEER: 14

13. Heating systems
a. Electric Heat Pump — Cap: 42.0 kBtu/hr, HSPF: 7.7

14. Hot water systems
a. Electric — Cap: 50 gallons, EF: 0.92

b. Conservation features
None

15. Credits — Pstat

Glass/Floor Area: 0.085

Total As-Built Modified Loads: 33.90
Total Baseline Loads: 43.17

PASS

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

PREPARED BY: Lemmie A Mates
DATE: 10-21-09

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

OWNER/AGENT: _____
DATE: _____

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

BUILDING OFFICIAL: _____
DATE: _____

- **Compliance requires certification by the air handler unit manufacturer that the air handler enclosure qualifies as certified factory-sealed in accordance with N1110.A.3.**

PROJECT

Title:	Campbell Residence	Bedrooms:	4	Adress Type:	Street Address
Building Type:	FLAsBuilt	Bathrooms:	0	Lot #	
Owner:	Lemmie and Mary Campbell	Conditioned Area:	2054	SubDivision:	
# of Units:	1	Total Stories:	1	PlatBook:	
Builder Name:	Trent Geibeig	Worst Case:	No	Street:	Timuqua
Permit Office:		Rotate Angle:	0	County:	Columbia
Jurisdiction:		Cross Ventilation:		City, State, Zip:	Lake City , FL ,
Family Type:	Single-family	Whole House Fan:			
New/Existing:	New (From Plans)				
Comment:					

CLIMATE

√	Design Location	TMY Site	IECC Zone	Design Temp 97.5 %	Design Temp 2.5 %	Int Design Temp Winter	Int Design Temp Summer	Heating Degree Days	Design Moisture	Daily Temp Range
____	FL, Gainesville	FL_GAINESVILLE_REGI	2	32	92	75	70	1305.5	51	Medium

FLOORS

√	#	Floor Type	Perimeter	R-Value	Area	Tile	Wood	Carpet
____	1	Slab-On-Grade Edge Insulatio	233 ft	0	2054 ft²	0.2	0.2	0.6

ROOF

√	#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	Tested	Deck Insul.	Pitch
____	1	Hip	Composition shingles	2379 ft²	0 ft²	Medium	0.96	No	0	30.3 deg

ATTIC

√	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
____	1	Full attic	Vented	300	2054 ft²	N	N

CEILING

√	#	Ceiling Type	R-Value	Area	Framing Frac	Truss Type
____	1	Under Attic (Vented)	30	2054 ft²	0.11	Wood

WALLS

√	#	Ornt	Adjacent To	Wall Type	Cavity R-Value	Area	Sheathing R-Value	Framing Fraction	Solar Absor.
____	1	N	Exterior	Frame - Wood	13	495 ft²		0.23	0.75
____	2	S	Exterior	Frame - Wood	13	288 ft²		0.23	0.75
____	3	E	Exterior	Frame - Wood	13	558 ft²		0.23	0.75
____	4	W	Exterior	Frame - Wood	13	360 ft²		0.23	0.75

DOORS

√	#	Ornt	Door Type	Storms	U-Value	Area
____	1	E	Insulated	None	0.46	40 ft²
____	2	W	Insulated	None	0.46	33.33 ft²

WINDOWS

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

√	#	Ornt	Frame	Panes	NFRC	U-Factor	SHGC	Storms	Area	Overhang Depth	Overhang Separation	Int Shade	Screening
____	1	N	Vinyl	Single (Clear)	Yes	0.55	0.6	N	5 ft²	1 ft 6 in	1 ft 6 in	HERS 2006	None
____	2	N	Vinyl	Single (Clear)	Yes	0.55	0.6	N	4 ft²	1 ft 6 in	1 ft 6 in	HERS 2006	None
____	3	E	Vinyl	Single (Clear)	Yes	0.55	0.6	N	45 ft²	1 ft 6 in	1 ft 6 in	HERS 2006	None
____	4	E	Vinyl	Single (Clear)	Yes	0.55	0.6	N	30 ft²	1 ft 6 in	1 ft 6 in	HERS 2006	None
____	5	W	Vinyl	Single (Clear)	Yes	0.55	0.6	N	30 ft²	6 ft 0 in	1 ft 6 in	HERS 2006	None
____	6	W	Vinyl	Single (Clear)	Yes	0.55	0.6	N	30 ft²	6 ft 0 in	1 ft 6 in	HERS 2006	None
____	7	W	Vinyl	Single (Clear)	Yes	0.55	0.6	N	30 ft²	1 ft 6 in	1 ft 6 in	HERS 2006	None

INFILTRATION & VENTING

√	Method	SLA	CFM 50	ACH 50	ELA	EqLA	---- Forced Ventilation ---- Supply CFM	Exhaust CFM	Run Time Fraction	Fan Watts
____	Default	0.00036	1940	6.30	106.5	200.3	0 cfm	0 cfm	0	0

GARAGE

√	#	Floor Area	Ceiling Area	Exposed Wall Perimeter	Avg. Wall Height	Exposed Wall Insulation
____	1	484 ft²	484 ft²	64 ft	9 ft	(invalid)

COOLING SYSTEM

√	#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Ductless
____	1	Central Unit	None	SEER: 14	42 kBtu/hr	1260 cfm	0.75	False

HEATING SYSTEM

√	#	System Type	Subtype	Efficiency	Capacity	Ductless
____	1	Electric Heat Pump	None	HSPF: 7.7	42 kBtu/hr	False

HOT WATER SYSTEM

√	#	System Type	EF	Cap	Use	SetPnt	Conservation
____	1	Electric	0.92	50 gal	70 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
_____	1	Attic	6	410.8 ft	Attic	102.7 ft	Default Leakage	Interior				

TEMPERATURES

Programable Thermostat: Y

Ceiling Fans:

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Cooling	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]
Heating	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]
Venting	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]	[X]

Thermostat Schedule: HERS 2006 Reference

Schedule Type		Hours 1	2	3	4	5	6	7	8	9	10	11	12
Cooling (WD)	AM	78	78	78	78	78	78	78	78	80	80	80	80
	PM	80	80	78	78	78	78	78	78	78	78	78	78
Cooling (WEH)	AM	78	78	78	78	78	78	78	78	78	78	78	78
	PM	78	78	78	78	78	78	78	78	78	78	78	78
Heating (WD)	AM	66	66	66	66	66	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	66	66
Heating (WEH)	AM	66	66	66	66	66	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	66	66

Code Compliance Cheklist

Residential Whole Building Performance Method A - Details

ADDRESS: Timuqua
Lake City, FL,

PERMIT #:

INFILTRATION REDUCTION COMPLIANCE CHECKLIST

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

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

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

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE INDEX* = 79

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

Timuqua, Lake City, FL,

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	4
5. Is this a worst case?	No
6. Conditioned floor area (ft²)	2054

7. Windows**	Description	Area
a. U-Factor:	Sgl, U=0.55	174.00 ft²
SHGC:	SHGC=0.60	
b. U-Factor:	N/A	ft²
SHGC:		
c. U-Factor:	N/A	ft²
SHGC:		
d. U-Factor:	N/A	ft²
SHGC:		
e. U-Factor:	N/A	ft²
SHGC:		

8. Floor Types	Insulation	Area
a. Slab-On-Grade Edge Insulation	R=0.0	2054.00 ft²
b. N/A	R=	ft²
c. N/A	R=	ft²

9. Wall Types	Insulation	Area
a. Frame - Wood, Exterior	R=13.0	1701.00 ft²
b. N/A	R=	ft²
c. N/A	R=	ft²
d. N/A	R=	ft²

10. Ceiling Types	Insulation	Area
a. Under Attic (Vented)	R=30.0	2054.00 ft²
b. N/A	R=	ft²
c. N/A	R=	ft²

11. Ducts
a. Sup: Attic Ret: Attic AH: Interior Sup. R= 6, 410.8 ft²

12. Cooling systems
a. Central Unit — Cap: 42.0 kBtu/hr, SEER: 14

13. Heating systems
a. Electric Heat Pump — Cap: 42.0 kBtu/hr, HSPF: 7.7

14. Hot water systems
a. Electric — Cap: 50 gallons, EF: 0.92

b. Conservation features
None

15. Credits — Pstat

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: The home's estimated Energy Performance Index is only available through the EnergyGauge USA - FlaRes2008 computer program. This is not a Building Energy Rating. If your Index is below 100, your home may qualify for incentives if you obtain a Florida Energy Gauge Rating. Contact the Energy Gauge Hotline at (321) 638-1492 or see the Energy Gauge web site at energygauge.com for information and a list of certified Raters. For information about Florida's Energy Efficiency Code for Building Construction, contact the Department of Community Affairs at (850) 487-1824.

**Label required by Section 13-104.4.5 of the Florida Building Code, Building, or Section B2.1.1 of Appendix G of the Florida Building Code, Residential, if not DEFAULT.

COLUMBIA COUNTY BUILDING DEPARTMENT 6-25-09
RESIDENTIAL CHECK LIST REQUIRMENTS

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

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

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

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

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

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

	GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL			Items to Include- Each Box shall be Circled as Applicable		
				Yes	No	N/A
1	Two (2) complete sets of plans containing the following:			✓		
2	All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void			✓		
3	Condition space (Sq. Ft.) 2054.		Total (Sq. Ft.) under roof 2976.	IIIIIIII	IIIIIIII	IIIII

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 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**	IIIIII	IIIII	IIIIII
		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/m²), to be used for the design of exterior component, cladding materials not specifally designed by the registered design professional.	✓		

Elevations Drawing including:

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

Floor Plan including:

20	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	✓		
21	Raised floor surfaces located more than 30 inches above the floor or grade	✓		
22	All exterior and interior shear walls indicated	✓		
23	Shear wall opening shown (Windows, Doors and Garage doors)	✓		
24	Show compliance with Section FBCR 310 Emergency escape and rescue opening shown in each bedroom (net clear opening shown) and Show compliance with Section FBCR 613.2 where the opening of an operable window is located more than 72 inches above the finished grade or surface below, the lowest part of the clear opening of the window shall be a minimum of 24 inches above the finished floor of the room in which the window is located. Glazing between the floor and 24 inches shall be fixed or have openings through which a 4-inch-diameter sphere cannot pass.	✓		
25	Safety glazing of glass where needed	✓		
26	Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 of FBCR)			
27	Show stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails			
28	Identify accessibility of bathroom (see FBCR SECTION 322)	✓		

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

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

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 valve of soil 1500 Pound Per Square Foot	/		
33	Location of horizontal and vertical steel, for foundation or walls (include # size and type) **For** structures with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an grounding electrode system. Per the National Electrical Code article 250.52.3	/		

FBCR 506: CONCRETE SLAB ON GRADE

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

FBCR 320: PROTECTION AGAINST TERMITES

36	Indicate on the foundation plan if soil treatment is used for subterranean termite prevention or Sub mit other approved termite protection methods. **Protection shall be provided by registered termiticides**	/		

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 priers			
41	Girder type, size and spacing to load bearing walls, stem wall and/or priers			
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 & inter of the areas structural panel sheathing			
49	Show Draftstopping, Fire caulking and Fire blocking			
50	Show fireproofing requirements for garages attached to living spaces, per FBCR section 309			
51	Provide live and dead load rating of floor framing systems (psf).			

FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION

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

FBCR :ROOF SYSTEMS:

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

FBCR 802:Conventional Roof Framing Layout

N/A

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

FBCR Table 602,3(2) & FBCR 803 ROOF SHEATHING

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

FBCR ROOF ASSEMBLIES FRC Chapter 9

71	Include all materials which will make up the roof 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 chapter11 Residential buildings compliance methods. **Two of the required forms are to be submitted**, *N1100.1.1.1 As an alternative to the computerized Compliance Method A, the Alternate Residential Point System Method hand calculation, Alternate Form 600A, may be used. All requirements specific to this calculation are located in Sub appendix C to Appendix G. Buildings complying by this alternative shall meet all mandatory requirements of this chapter. Computerized versions of the Alternate Residential Point System Method shall not be acceptable for code compliance.*

	GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL	Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
73	Show the insulation R value for the following areas of the structure			
74	Attic space			
75	Exterior wall cavity			
76	Crawl space			

HVAC information

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

Plumbing Fixture layout shown

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

Private Potable Water

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

Electrical layout shown including

85	Show Switches, receptacles outlets, lighting fixtures and Ceiling fans	/		
86	Show all 120-volt, single phase, 15- and 20-ampere branch circuits outlets required to be protected by **Ground-Fault Circuit Interrupter (GFCI) Article 210.8 A**	/		
87	Show the location of smoke detectors & Carbon monoxide detectors	/		
88	Show service panel, sub-panel, location(s) and total ampere ratings	/		
89	On the electrical plans identify the electrical service overcurrent protection device for the main electrical service. This device shall be installed on the exterior of structures to serve as a disconnecting means for the utility company electrical service. Conductors used from the exterior disconnecting means to a panel or sub panel shall have four-wire conductors, of which one conductor shall be used as an equipment ground. Indicate if the utility company service entrance cable will be of the overhead or underground type. **For structures** with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an Grounding electrode system. Per the National Electrical Code article 250.52.3	/		
90	Appliances and HVAC equipment and disconnects	/		
91	Show all 120-volt, single phase, 15- and 20-ampere branch circuits supplying outlets installed in dwelling unit family rooms, dining rooms, living rooms, parlors, libraries, dens, bedrooms, sunrooms, recreation rooms, closets, hallways, or similar rooms or areas shall be protected by a listed **Combination arc-fault circuit interrupter,** Protection device.	/		

Disclosure Statement for Owner Builders *If you as the applicant will be acting as an owner/builder under section 489.103(7) of the Florida Statutes, submit the required owner builder disclosure statement form.*

Notice Of Commencement

A notice of commencement form **recorded** in the Columbia County Clerk Office is required to be filed with the building department Before Any Inspections can be preformed.

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

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS

		YES	NO	N/A
92	**Building Permit Application** A current Building Permit Application form is to be completed and submitted for all residential projects	/		
93	**Parcel Number** The parcel number (Tax ID number) from the Property Appraiser (386) 758-1084 is required. A copy of property deed is also requested	/		
94	**Environmental Health Permit or Sewer Tap Approval** A copy of a approved Columbia County Environmental Health (386) 758-1058	/		
95	**City of Lake City** A permit showing an approved waste water sewer tap	—		
96	**Toilet facilities shall be provided for all construction sites**	/		
97	**Town of Fort White** (386) 497-2321 If the parcel in the application for building permit is within the Corporate city limits of Fort White an approval land use development letter issued by the Town of Fort is required to be submitted with the application for a building permit.	—		

N/A

98	**Flood Information:** All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting a application to this office. Any project located within a flood zone where the base flood elevation (100 year flood) has been established shall meet the requirements of Section 8.5.2 of the Columbia County Land Development Regulations. Any project located within a flood zone where the base flood elevation has not been established (Zone A) shall meet the requirements of Section 8.5.3 of the Columbia County Land Development Regulations			
99	CERTIFIED FINISHED FLOOR ELEVATIONS will be required on any project where the base flood elevation (100 year flood) has been established			
100	A development permit will also be required. Development permit cost is **$50.00**			
101	**Driveway Connection:** If the property does not have an existing access to a public road, then an application for a culvert permit (**$25.00**) must be made. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver (**$50.00**). All culvert waivers are sent to the Columbia County Public Works Department for approval or denial.			
102	**911 Address:** If the project is located in an area where a 911 address has not been issued, then application for a 911address must be applied for and **received** through the Columbia County Emergency Management Office of 911 Addressing Department (386) 758-1125			

Section R101.2.1 of the Florida Building Code Residential:

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

Section 105 of the Florida Building Code defines the:

Time limitation of application.

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

Single-family residential dwelling.

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

Permit intent.

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

PRODUCT APPROVAL SPECIFICATION SHEET

Location: _____ **Project Name:** Campbell

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

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
A. EXTERIOR DOORS			FL 4242
1. Swinging			
2. Sliding			
3. Sectional			
4. Roll up			
5. Automatic			
6. Other			
B. WINDOWS		Atrium SH 160 Series	FL 6952.4
1. Single hung			FL 5108.
2. Horizontal Slider			
3. Casement			
4. Double Hung			
5. Fixed			FL 5418
6. Awning			
7. Pass -through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11 Dual Action			
12. Other			
C. PANEL WALL			
1. Siding			FL 889-2
2. Soffits			FL 4899
3. EIFS			
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block			
8. Membrane			
9. Greenhouse			
10. Other			
D. ROOFING PRODUCTS			
1. Asphalt Shingles			FL 586 R2
2. Underlayments			FL 1814 R1
3. Roofing Fasteners			
4. Non-structural Metal			
Rf 5. Built-Up Roofing			
6. Modified Bitumen			
7. Single Ply Roofing Sys			
8. Roofing Tiles			
9. Roofing Insulation			
10. Waterproofing			
11. Wood shingles /shakes			
12. Roofing Slate			

New Construction Subterranean Termite Service Record

OMB Approval No. 2502-0525
(exp. 02/29/2012)

This form is completed by the licensed Pest Control Company.

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information is required to obtain benefits. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.
Section 24 CFR 200.926d(b)(3) requires that the sites for HUD insured structures must be free of termite hazards. This information collection requires the builder to certify that an authorized Pest Control company performed all required treatment for termites, and that the builder guarantees the treated area against infestation for one year. Builders, pest control companies, mortgage lenders, homebuyers, and HUD as a record of treatment for specific homes will use the information collected. The information is not considered confidential, therefore, no assurance of confidentiality is provided.

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

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

#28269

Section 1: General Information (Pest Control Company Information)

Company Name Aspen Pest Control, Inc.
Company Address P.O. Box 1795 City Lake City State FL Zip 32056
Company Business License No. JB100670 Company Phone No. 386-755-0511
FHA/VA Case No. (if any)

Section 2: Builder Information

Company Name Trent Geiberg Construction Phone No. 397-0545

Section 3: Property Information

Location of Structure(s) Treated (Street Address or Legal Description, City, State and Zip) Lemmie and Mary Campbell
169 SW Timuqua Terr Ft White, Fl 32038

Section 4: Service Information

Date(s) of Service(s) 12-21-2009
Type of Construction (More than one box may be checked) ☒ Slab ☐ Basement ☐ Crawl ☐ Other

Check all that apply:

☐ A. Soil Applied Liquid Termiticide
Brand Name of Termiticide: Pro-Thor EPA Registration No. 93927-4
Approx. Dilution (%): 5 Approx. Total Gallons Mix Applied: 415 Treatment completed on exterior: ☒ Yes ☐ No

☐ B. Wood Applied Liquid Termiticide
Brand Name of Termiticide: EPA Registration No.
Approx. Dilution (%): Approx. Total Gallons Mix Applied:

☐ C. Bait System Installed
Name of System EPA Registration No. Number of Stations Installed

☐ D. Physical Barrier System Installed
Name of System Attach installation information (required)

Service Agreement Available? ☒ Yes ☐ No
Note: Some state laws require service agreements to be issued. This form does not preempt state law.

Attachments (List)

Comments

Name of Applicator(s) Cliff Lacey Certification No. (if required by State law) JF104376

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

Authorized Signature Cliff Lacey Date 12-21-2009

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

Form **NPCA-99-B** may still be used

form **HUD-NPMA-99-B**

CERTIFICATE OF

OCCUPANCY

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 11-7S-16-04182-955 **Building permit No.** 000028264

Use Classification SFD,UTILITY **Fire:** 44.94

Permit Holder TRENT GIEBEIG **Waste:** 117.25

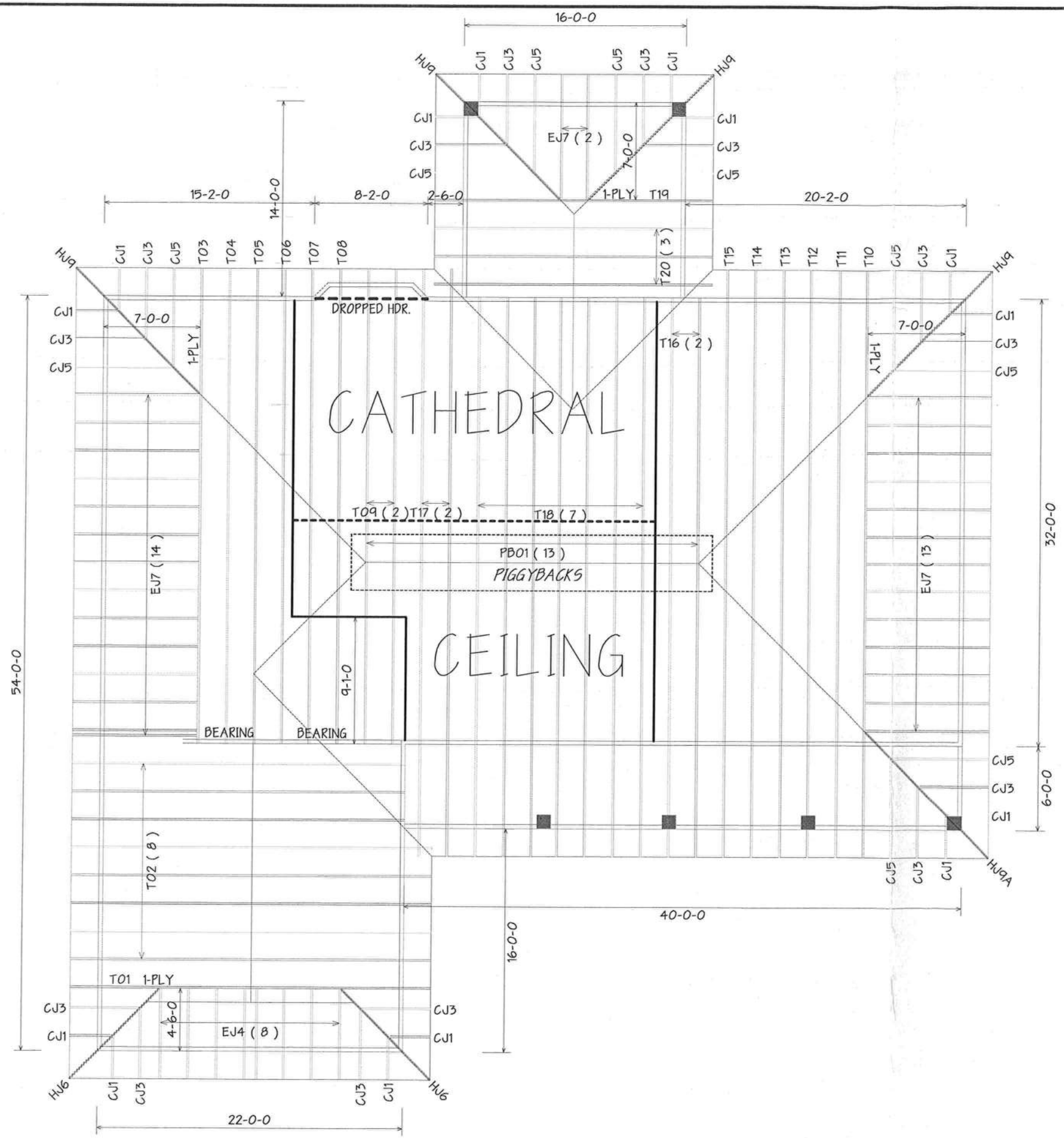
Owner of Building LEMMIE & MARY CAMPBELL **Total:** 162.19

Location: 169 SW TIMUQUA TERRACE

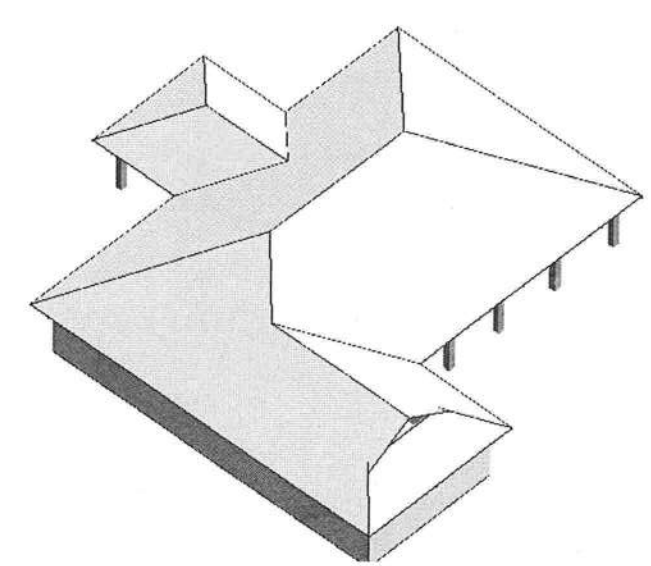
Date: 03/23/2010

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)



7/12 PITCH
2'-0" O/H



BEARING HEIGHT SCHEDULE

	9'-0"

NOTES:

1.) REFER TO HIB 91 (RECOMMENDATIONS FOR HANDLING INSTALLATION AND TEMPORARY BRACING.) REFER TO ENGINEERED DRAWINGS FOR PERMANENT BRACING REQUIRED.

2.) ALL TRUSSES (INCLUDING TRUSSES UNDER VALLEY FRAMING) MUST BE COMPLETELY DECKED OR REFER TO DETAIL V105 FOR ALTERNATE BRACING REQUIREMENTS.

3.) ALL VALLEYS ARE TO BE CONVENTIONALLY FRAMED BY BUILDER.

4.) ALL TRUSSES ARE DESIGNED FOR 2' o.c. MAXIMUM SPACING, UNLESS OTHERWISE NOTED.

5.) ALL WALLS SHOWN ON PLACEMENT PLAN ARE CONSIDERED TO BE LOAD BEARING, UNLESS OTHERWISE NOTED.

6.) SY42 TRUSSES MUST BE INSTALLED WITH THE TOP BEING UP.

7.) ALL ROOF TRUSS HANGERS TO BE SIMPSON HTU26 UNLESS OTHERWISE NOTED. ALL FLOOR TRUSS HANGERS TO BE SIMPSON THA422 UNLESS OTHERWISE NOTED.

8.) BEAM/HEADER/LINTEL (HDR) TO BE FURNISHED BY BUILDER.

SHOP DRAWING APPROVAL

THIS LAYOUT IS THE SOLE SOURCE FOR FABRICATION OF TRUSSES AND VOIDS ALL PREVIOUS ARCHITECTURAL OR OTHER TRUSS LAYOUTS. REVIEW AND APPROVAL OF THIS LAYOUT MUST BE RECEIVED BEFORE ANY TRUSSES WILL BE BUILT. VERIFY ALL CONDITIONS TO INSURE AGAINST CHANGES THAT WILL RESULT IN EXTRA CHARGES TO YOU.

Requested Delivery Date _____

Approved by: _____ Date: _____

Builders FirstSource

Bunnell
PHONE: 904-437-3349 FAX: 904-437-3994

Jacksonville
PHONE: 904-772-6100 FAX: 904-772-1973

Lake City
PHONE: 386-755-6894 FAX: 386-755-7973

Sanford
PHONE: 407-322-0059 FAX: 407-322-5553

BUILDER: GIEBEIG HOMES		
LEGAL ADDRESS: CAMPBELL RES.		
MODEL: CUSTOM		REVISION: SCALE: NTS
DATE: 10-22-09	DRAWN BY: K.L.H.	JOB #: 317841