DATE 05/06/2015

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000032942

APPLICANT RICHARD JORDAN PHONE 352.317.7578

ADDRESS — POB 574 EARLTON FL 32631

OWNER RICHARD JORDAN PHONE 352.317.7578

ADDRESS 1019 SW WASHINGTON AVENUE FT. WHITE FL 32038

CONTRACTOR RICHARD JORDAN PHONE 352.317.7578

LOCATION OF PROPERTY 47-S TO US 27,TR TO RIVERSIDE,TR TO UTAH,TL TO WASHINGTON,TR
IT'S ARPROX. 1/2 MILE ON R.

TYPE DEVELOPMENT SFD/UTILITY ESTIMATED COST OF CONSTRUCTION 44800.00

HEATED FLOOR AREA 688.00 TOTAL AREA 896.00 HEIGHT — STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 6/12 FLOOR CONC

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 AE DEVELOPMENT PERMIT NO. 15-003

PARCEL ID 26-6S-15-00792-000 SUBDIVISION 3 RIVERS ESTATES

LOT 64 BLOCK — PHASE — UNIT 10 TOTAL ACRES 1.00

		OWNER	Richard Jordan
Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor
EXISTING	15-0191-E	LH	TC	N
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: MFE @ 34.00'. NEED FINISH FLOOR ELEVATION CERTIFICATE BEFORE POWER &
SHOWING ELEVATION ON EQUIPMENT.

Check # or Cash 4180

FOR BUILDING & ZONING DEPARTMENT ONLY

Temporary Power ____ (date/app. by) Foundation ____ (date/app. by) Monolithic (footer/Slab) ____ (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 $	225.00	CERTIFICATION FEE $	4.48	SURCHARGE FEE $	4.48		
MISC. FEES $	0.00	ZONING CERT. FEE $	50.00	FIRE FEE $	0.00	WASTE FEE $	
FLOOD DEVELOPMENT FEE $	50.00	FLOODZONE FEE $	25.00	CULVERT FEE $		TOTAL FEE	358.96

INSPECTORS OFFICE ____ CLERKS OFFICE ____

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

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 FO IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORI 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.

DATE 05/06/2015

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HEATED FLOOR AREA 688.00 TOTAL AREA 896.00 HEIGHT STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 6/12 FLOOR CONC

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PARCEL ID 26-6S-15-00792-000 SUBDIVISION 3 RIVERS ESTATES

LOT 64 BLOCK PHASE UNIT 10 TOTAL ACRES 1.00

		OWNER		
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EXISTING	15-0191-E	LH	TC	N
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

Time/STUP No.

COMMENTS: MFE @ 34.00'. NEED FINISH FLOOR ELEVATION CERTIFICATE BEFORE POWER &
SHOWING ELEVATION ON EQUIPMENT. NOC ON FILE.

Check # or Cash 4180

FOR BUILDING & ZONING DEPARTMENT ONLY

Temporary Power _____ date/app. by

Foundation 05/29/2015 IM date/app. by

Monolithic (footer/Slab) _____ date/app. by

Under slab rough-in plumbing _____ date/app. by

Slab _____ date/app. by

Sheathing/Nailing _____ date app. by

Framing 08/05/2015 IM date/app. by

Insulation 08/17/2015 IM date/app. by

Rough-in plumbing above slab and below wood floor 08/05/2015 IM date/app. by

Electrical rough-in 08/05/2015 IM date/app. by

Heat & Air Duct 08/05/2015 IM date/app. by

Peri. beam (Lintel) 06/09/2015 IM 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 $ 225.00 CERTIFICATION FEE $ 4.48 SURCHARGE FEE $ 4.48

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** 358.96

INSPECTORS OFFICE CLERKS OFFICE

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

4-29-15
T.C.
1 ft Rise
& NOC Notified

Columbia County Building Permit Application

☑ 2nd Pg Signature

For Office Use Only Application # 1503-72 Date Received 3-30-15 By LH Permit # 32942

Zoning Official LH Date 4-7-15 Flood Zone A-E Land Use AG Zoning ESA-2

FEMA Map # 0458C Elevation 33' MFE 34' River Santa Fe Plans Examiner T.C. Date 4-6-15

Comments ☑ 1ft Rise Letter / Need finished Const. Elevation Cert. Before Power ! Showing 4 on Eq

☑ NOC ☑ EH ☑ Deed or PA ☑ Site Plan ☑ State Road Info ☑ Well letter ☑ 911 Sheet ☑ Parent Parcel #

☑ Dev Permit # F-023-15-003 ☑ In Floodway ☑ Letter of Auth. from Contractor ☑ W Comp. letter

(No Plan) ☑ Distance Statement

IMPACT FEES: EMS _____ Fire _____ Corr _____ ☑ Sub VF Form ☑ Schnabel Signature (Chubb)

Road/Code _____ School _____ = TOTAL (Suspended) ☑ Ellisville Water ☑ App Fee Paid

Septic Permit No. 15-0191-E Fax _____

Name Authorized Person Signing Permit RICHARD JORDAN Phone 352-317-7578

Address 11704 NE 208TH TERR, P.O. BOX 574, EARLETON, FL 32631

Owners Name RICHARD JORDAN Phone 352-317-7578

911 Address 1019 S.W. WASHINGTON AVE., FT. WHITE, FL 32038

Contractors Name OWNER/BUILD Phone 352.317.7578

Address 11704 N.E. 208TH TERR, P.O. BOX 574, EARLETON, FL 326

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address RICARDO CAVALINO, 22 S.W. 5TH AVE., GAINESVILLE FL 32

Mortgage Lenders Name & Address NONE

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

Property ID Number 26-6S-15-00792-000 Estimated Cost of Construction $40,000

Subdivision Name 3 RIVERS ESTATES Lot 64 Block ____ Unit 10 Phase ____

Driving Directions FROM RT 27 turn ONTO RIVERSIDE AVE, TURN L AT SW. UTAH ST, THEN TURN RIGHT ONTO SW WASHINGTON Go THRU 2 stop signs & ON LEFT. Number of Existing Dwellings on Property 1

Construction of SFD, Utility Total Acreage 1 Lot Size 406'x101'

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

Actual Distance of Structure from Property Lines - Front 85' Side 28' Side 39' Rear 289'

Number of Stories 1 Heated Floor Area 688' Total Floor Area 896' 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.

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. 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.)

Richard Jordan

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_____
Columbia County
Competency Card Number_____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this ____ day of _____ 20___.

Personally known_____ **or Produced Identification**_____

SEAL:

State of Florida Notary Signature (For the Contractor)

Britt Surveying and Mapping, LLC
2086 SW Main Blvd Ste 112 • Lake City, FL 32025
386-752-7163 P • 386-752-5573 F • www.brittsurvey.com

10/30/14

L-23326

Re: Lot 64 Three Rivers Estates Unit 10

Jordan Vacations

To Whom It May Concern:

There is a benchmark set in a power pole at an elevation of 30.50 feet. The elevations shown are based on NAVD 88 datum.

Sincerely,

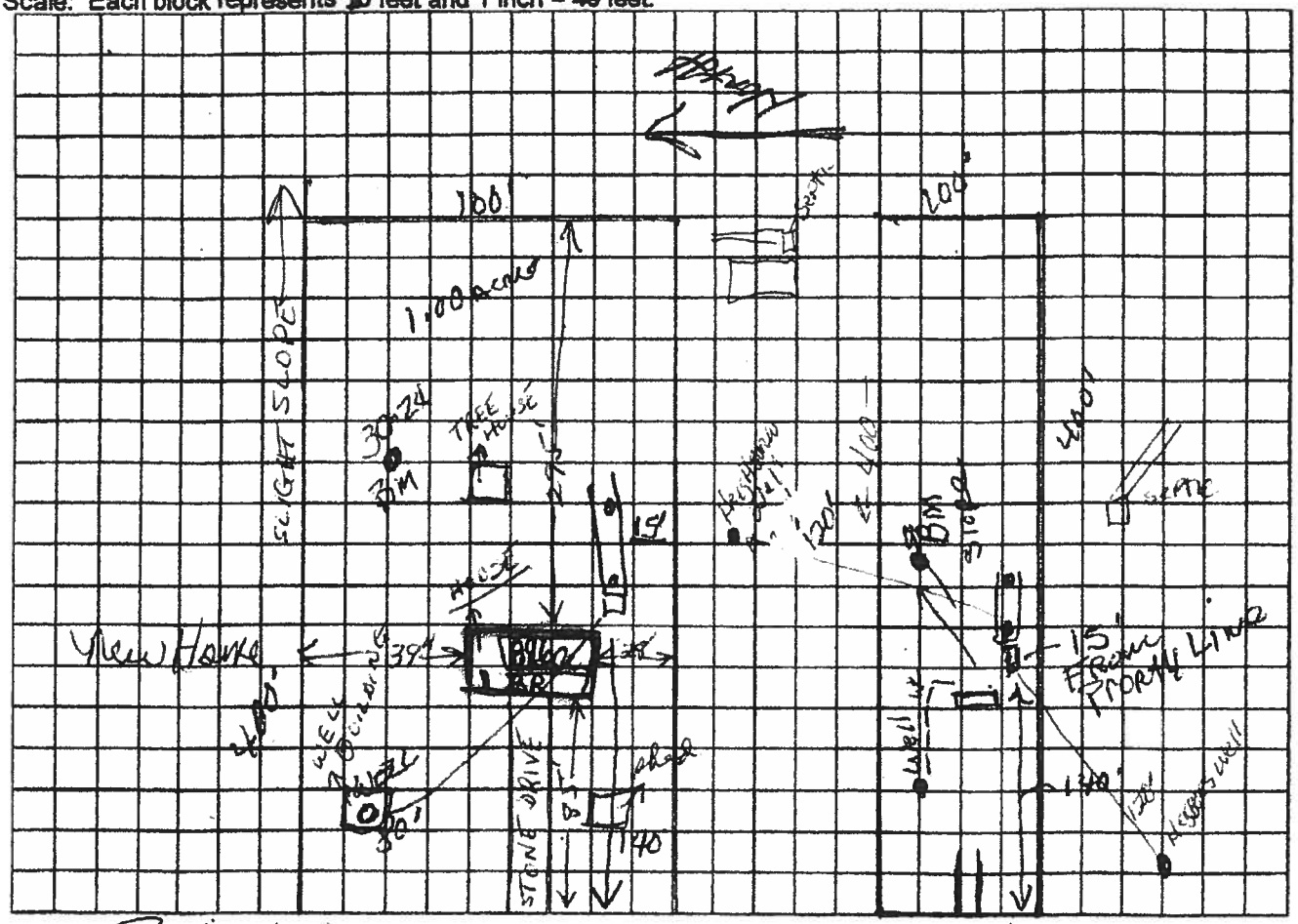
L. Scott Britt
LS 5757

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number: 15-0191E

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

Scale: Each block represents ~~10~~ 25 feet and 1 inch = ~~40~~ 100 feet.



Notes: Richard Jordan
LOT 64 UNIT 10 Three Rivers
1.00 Acres

Site Plan submitted by: Richard Jordan

Plan Approved ✓ REVIEWED ___ Not Approved ___ Date 4/30/15

By _____ County Health Department

4/8/15

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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

PERMIT NO. 15-0191E
DATE PAID: 3/31/15
FEE PAID: 60.00
RECEIPT #: 1182037

APPLICATION FOR:
[ ] New System [X] Existing System [ ] Holding Tank [ ] Innovative
[ ] Repair [ ] Abandonment [ ] Temporary [ ] _____

APPLICANT: RICHARD JORDAN

AGENT: _____ TELEPHONE: 352-317-7578

MAILING ADDRESS: P.O. Box 574, EARLETON, FL 32631

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

PROPERTY INFORMATION

LOT: 64 BLOCK: UNIT 10 SUBDIVISION: THREE RIVERS ESTATES PLATTED: 4/8/63

PROPERTY ID #: 26-65-15-00792-000 ZONING: ✓ I/M OR EQUIVALENT: [Y / (N)]

PROPERTY SIZE: 1.00 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD

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

PROPERTY ADDRESS: 1019 S.W. WASHINGTON AVE, FT. WHITE, FL 32038

DIRECTIONS TO PROPERTY: Hwy 47 So, right on Hwy 27, left on Riverside, left on UTAH ST, & right onto Washington Ave, go thrw 2 stop signs & property on left.

BUILDING INFORMATION [ ] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	SINGLE HOME	1	896	____ ORIGINAL ATTACHED ____
2				
3				
4				

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

SIGNATURE: Richard Jordan DATE: 4/30/15

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

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1503-72 CONTRACTOR RICHARD JORDAN PHONE 352-317-75

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 RICHARD JORDAN License #: Owner	Signature Richard Jordan Phone #: 352-317-7578
MECHANICAL/ A/C 428	Print Name E. THOMAS BUCCHI License #: CAC058170	Signature E. Thomas Bucchi Phone #: 386-497-2216
PLUMBING/ GAS 1204	Print Name DANIEL SCHNAEBEL License #: CFC057788	Signature Daniel B. Schnaebel Phone #: 386-867-0364
ROOFING	Print Name RICHARD JORDAN License #: Owner	Signature Richard Jordan Phone #: 352 317-7578
SHEET METAL	Print Name License #:	Signature Phone #:
FIRE SYSTEM/ SPRINKLER	Print Name License#:	Signature Phone #:
SOLAR	Print Name License #:	Signature Phone #:

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

RICHARD JORDAN, Richard Jordan, owner

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 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: 2/19/2013 **DATE ISSUED:** 2/25/2013

ENHANCED 9-1-1 ADDRESS:

1019 SW WASHINGTON AVE

FORT WHITE FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

00-00-00-00792-000

Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCEL.

Address Issued By: _____

Columbia County 9-1-1 Addressing / GIS Department

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

2474

Prepared by:
Elaine R. Davis
American Title Services of Lake City, Inc.
321 SW Main Boulevard, Suite 105
Lake City, Florida 32025

File Number: 13-053

Inst. 201312000631 Date 1/15/2013 Time 11:35 AM
Doc Stamp-Deed 70.00
DC,P.DeWitt Cason,Columbia County Page 1 of 1 B 1247 P 2312

Warranty Deed

Made this January 11, 2013 A.D.

By **RICHARD C. BIDDLE and PATRICIA M. BIDDLE**, husband and wife, whose address is: 5528 Wyoming Avenue, New Port Richey, Florida 32652, hereinafter called the grantor,

to **RICHARD JORDAN**, whose post office address is: 11704 NE 208th Terrace / P.O. Box 574, Earleton, Florida 32631, hereinafter called the grantee:

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

Witnesseth, that the grantor, for and in consideration of the sum of Ten Dollars, ($10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Columbia County, Florida, viz:

LOT 64, UNIT 10, THREE RIVERS ESTATES, a subdivision according to the Plat thereof as recorded in Plat Book 6 page 10 of the Public Records of **COLUMBIA COUNTY, FLORIDA.**

Parcel ID Number: **00792-000**

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

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

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31, 2012.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

Elaine R. Davis
Witness Printed Name Elaine R. Davis

Kelly DuBose
Witness Printed Name Kelly DuBose

Richard C. Biddle (Seal)
RICHARD C. BIDDLE
Address 5528 Wyoming Avenue,
New Port Richey, Florida 32652

Patricia M. Biddle (Seal)
PATRICIA M. BIDDLE

State of FLORIDA
County of COLUMBIA

The foregoing instrument was acknowledged before me this 11th day of January, 2013, by RICHARD C. BIDDLE and PATRICIA M. BIDDLE, husband and wife, who is/are personally known to me or who has produced Drivers as identification.

Elaine R. Davis
Notary Public
Print Name:_____

My Commission Expires:_____

ELAINE R. DAVIS
Commission # EE 103181
Expires October 14, 2015
Bonded Thru Troy Fain Insurance 800-385-7019

COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave., Suite B-21
Lake City, FL 32055
Office: 386-758-1008 Fax: 386-758-2160

OWNER BUILDER DISCLOSURE STATEMENT

I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed and bonded in Florida and to list his or her license numbers on permits and contracts.

I understand that I may build or improve a one-family or two-family residence or farm outbuilding. I may also build or improve a commercial building if the costs do not exceed $75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased with in 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.

I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.

I understand that it is frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 850-487-1395 or Internet website address http://www.myflorida.com/dbpr/pro/cilb/index.html for more information about licensed contractors.

I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address:

1019 SW Washington Ave, ft. White, fl 32038.

I agree to notify Columbia County Building Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure. Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual of firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

I understand that if I hire subcontractors they must be licensed for that type of work in Columbia County, ex: framing, stucco, masonry, and state registered builders. Registered Contractors must have a minimum of $300,000.00 in General Liability insurance coverage and the proper workers' compensation. Specialty Contractors must have a minimum of $100,000.00 in General Liability insurance coverage and the proper workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to Columbia County Building Department.

TYPE OF CONSTRUCTION

(✓) Single Family Dwelling ( ) Two-Family Residence ( ) Farm Outbuilding

( ) Addition, Alteration, Modification or other Improvement

( ) Commercial, Cost of Construction_____ Construction of_____

( ) Other_____

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

Richard Jordan 3/6/15

Owner Builder Signature Date

NOTARY OF OWNER BUILDER SIGNATURE

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

Notary Signature Rita Armstrong Date 3/6/2015 (Seal)

RITA ARMSTRONG
Notary Public, State of Florida
Commission# FF 197824
My comm. expires Feb. 9, 2019

FOR BUILDING DEPARTMENT USE ONLY

I hereby certify that the above listed owner builder has been given notice of the restriction stated above.

Building Official/Representative_____

Revised: 7-23-09
DISCLOSURE STATEMENT 09
Documents: B&Z Forms

LYNCH WELL DRILLING, INC.
173 SW YOUNG PLACE
LAKE CITY, FL 32025

Invoice

Date	Invoice #
2/3/2013	11036

Bill To

Richard Jordan
P.O. Box 574
Earleton, Fl 32631

Due Date
2/3/2013

Quantity	Description	Rate	Amount
1	4" Steel casing well to 60' with 1 HP pump, 1 1/4 galv. drop pipe and 86 gallon bladder tank Well depth 60' Water depth 20 Pump set 42 Three Rivers Lot 64 Unit 10	2,950.00	2,950.00

Pd 2/6/13

Every 30 days 1.5% finance charges will be added to balance.

Total $2,950.00

Phone #	Fax #	E-Mail	Web Site
(386) 752-6677	(386) 752-1477	linda@lynchwell.comcastbiz.net	

Columbia County Building Department
Flood Development Permit

Development Permit
F 023- 15-003

DATE 05/06/2015 BUILDING PERMIT NUMBER 000032942

APPLICANT RICHARD JORDAN PHONE 352.317.7578

ADDRESS POB 574 EARLTON FL 32631

OWNER RICHARD JORDAN PHONE 352.317.7578

ADDRESS 1019 SW WASHINGTON AVENUE FT. WHITE FL 32038

CONTRACTOR RICHARD JORDAN PHONE 352.317.7578

ADDRESS 1019 SW WASHINGTON AVENUE FT. WHITE FL 32038

SUBDIVISION 3 RIVERS ESTATES Lot 64 Block Unit 10 Phase

TYPE OF DEVELOPMENT SFD/UTILITY PARCEL ID NO. 26-6S-15-00792-000

FLOOD ZONE AE BY LH 2-4-2009 FIRM COMMUNITY # 120070 - PANEL #

FIRM 100 YEAR ELEVATION 33.0' PLAN INCLUDED YES or NO

REQUIRED LOWEST HABITABLE FLOOR ELEVATION 34.0'

IN THE REGULATORY FLOODWAY YES or (NO) RIVER SANTA FE

SURVEYOR / ENGINEER NAME BRETT CREWS, PE LICENSE NUMBER 65592

✓ ONE FOOT RISE CERTIFICATION INCLUDED

ZERO RISE CERTIFICATION INCLUDED

SRWMD PERMIT NUMBER
(INCLUDING THE ONE FOOT RISE CERTIFICATION)

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED

INSPECTED DATE BY

COMMENTS AWAITS FINISH FLOOR ELEVATION CERTIFICATE
PRIOR TO POWER W/ EQUIPMENT ELEVATION

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

1503-72

Crews Engineering Services, LLC
PO Box 970
Lake City, FL 32056
Ph: 386.754.4085
brett@crewsengineeringservices.com

ONE FOOT RISE ANALYSIS AND CERTIFICATION
100 YEAR BASE FLOOD

PROJECT DATA

PARCEL ID: 00-00-00-00792-000

PROPERTY DESCRIPTION: Lot 64, Unit 10 Three Rivers Estates

OWNER: Richard Jordan

PROJECT DESCRIPTION: 900 sqft site built home constructed +/- 85' from SW Washington Ave

FLOOD ZONE: AE

BASE FLOOD ELEVATION: 33.3 Based on SRWMD Effective Flood Report

EXISTING GRADE ELEVATION (AT BUILDING LOCATION): +/-29' from USGS Quad Map

CONCLUSION

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

Area of Flood Zone = Undetermined, Associated with the Santa Fe River
Depth of Lot below Flood Elevation = 33.3 ft – 29 ft = 4.3 ft
Storage Volume Removed due to development = 4.3 ft * 900 sf = 3870 cf = 0.089 acre-ft
Flood Level Increase (if flood zone area = lot size = 0.93 acres) = 0.089 acre–ft / 0.93 acres = 0.09 ft

This is a very conservative calculation for the following reasons:

- Flood Zone Area is much larger than 0.93 acres and associated with the Santa Fe River
- New Building will be supported on Piers. The Calculations assume filling completely within footprint of building below the 100 year BFE.

CERTIFICATION

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

ATTACHEMENTS

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

BRETT ALAN CREWS LICENSE No 65592 STATE OF FLORIDA PROFESSIONAL ENGINEER
05-9-2015

Brett A. Crews, PE No. 65592

Columbia County Property Appraiser

J. Doyle Crews - Lake City, Florida 32055 | 386-758-1083

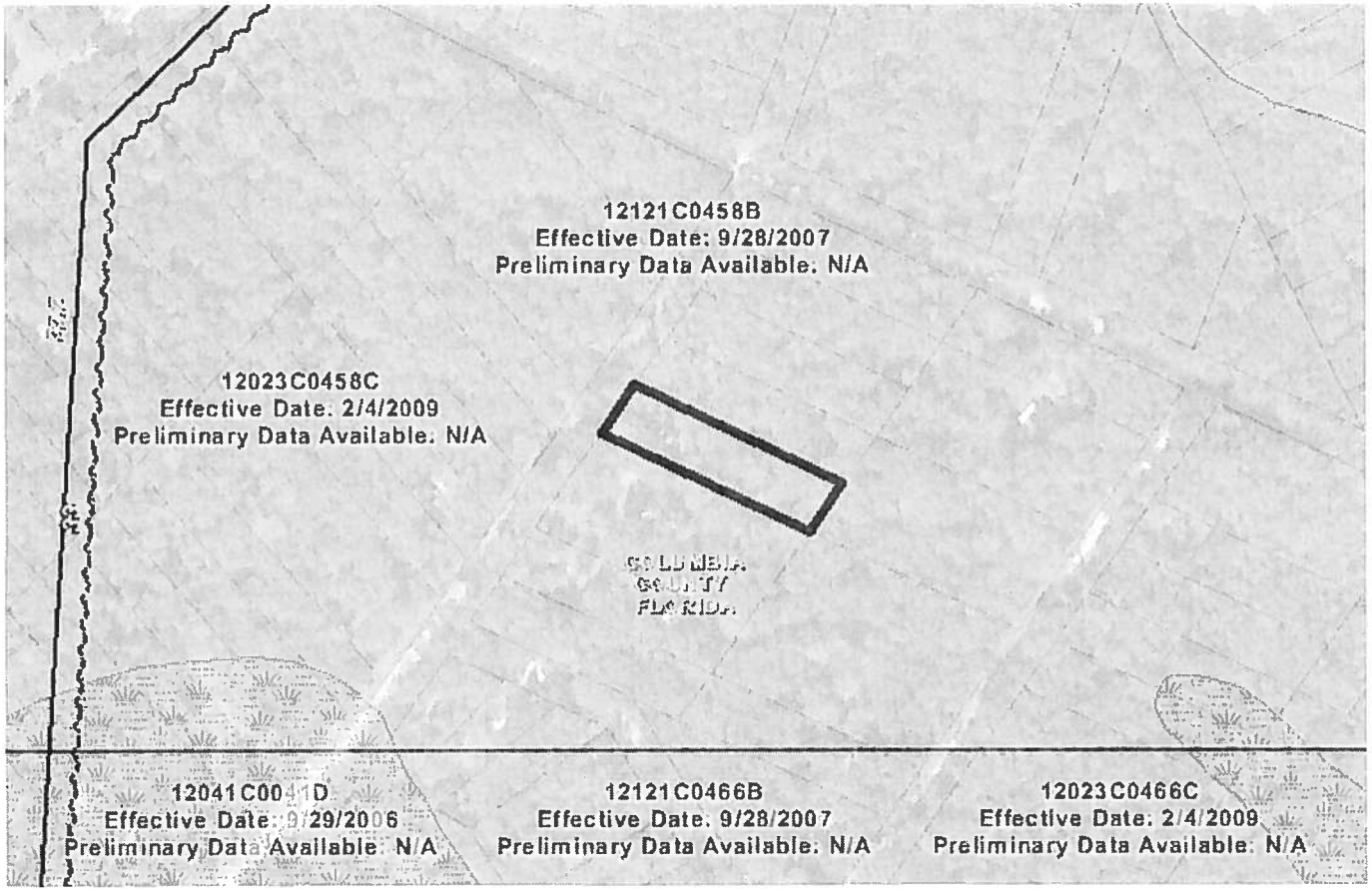
PARCEL: 00-00-00-00792-000 - AC/XFOB (009901)

LOT 64 UNIT 10 THREE RIVERS ESTATES. WD 1247-2312,

NOTES:

Name:	JORDAN RICHARD	**2014 Certified Values**	
Site:		Land	$10,000.00
Mail:	11704 NE 208TH TERRACE EARLETON, FL 32631	Bldg	$0.00
		Assd	$10,000.00
Sales Info	1/11/2013$10,000.00 V / Q 7/1/1984 $6,500.00 V / Q	Exmpt	$0.00
		Taxbl	Cnty: $10,000 Other: $10,000 | Schl: $10,000

Suwannee River Water Management District
Effective Flood Information Report



Effective Flood Zones described on Page 2

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

LOCATION

Date: 05-04-2015

Parcel: 00-00-00-00792-000

County: Columbia

STR: S026 T06 R15

Columbia Flood Hazard Areas Status: Effective: 02/04/2009

FLOOD INFORMATION

FIRM Panel(s): 12023C0458C,12121C0458B

Parcel In Special Flood Hazard Area? (SFHA): Yes

Flood Zone(s): AE

1% Annual Chance Flood Elev (BFE): 33.3 (feet)

Floodway: No

10% Annual Chance Flood Elev: 27.4 (feet)

50% Annual Chance Flood Elev: 21.9 (feet)

Note: Elevations are based on NAVD88

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

NOTICE OF COMMENCEMENT

Clerk's Office Stamp

Inst:201512008066 Date:5/6/2015 Time:1:57 PM
DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1294 P:302

Tax Parcel Identification Number:

26-65-15-00792-000

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

1. Description of property *(legal description)*: LOT 64 UNIT 10 3 RIVERS ESTATES
   a) Street *(job)* Address: 1019 S.W. WASHINGTON AVE, FT. WHITE, FL 32631
2. General description of improvements: BUILD NEW SINGLE HOME
3. Owner Information
   a) Name and address: RICHARD JORDAN, 11704 NE 208TH TERR, EARLETON, FL 32631
   b) Name and address of fee simple titleholder (if other than owner) _____
   c) Interest in property _____
4. Contractor Information
   a) Name and address: OWNER/BUILDER _____
   b) Telephone No : _____ Fax No. (Opt.) _____
5. Surety Information
   a) Name and address: _____
   b) Amount of Bond: _____
   c) Telephone No.: _____ Fax No. (Opt.) _____
6. Lender
   a) Name and address: _____
   b) Phone No. _____
7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served.
   a) Name and address: RICHARD JORDAN, P.O. BOX 574, EARLETON, FL 32631
   b) Telephone No.: 352-317-7578 Fax No. (Opt.) _____
8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(l)(b), Florida Statutes:
   a) Name and address: PEGGY CLOUD, 107 MILWAKEE AVE, ORANGE PK, FL
   b) Telephone No _____ Fax No. (Opt.) _____
9. Expiration date of Notice of Commencement **(the expiration date is one year from the date of recording unless a different date is specified)**: _____

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

STATE OF FLORIDA
COUNTY OF COLUMBIA

10. Richard Jordan
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager

RICHARD JORDAN
Printed Name

The foregoing instrument was acknowledged before me , a Florida Notary, this 6 day of May, 2015, by: Richard Jordan as Owner **(type of authority, e.g. officer, trustee, attorney fact) for** Self **(name of party on behalf of whom instrument was executed).**

Personally Known ____ OR Produced Identification ✓ Type FLDL

Notary Signature _____ Notary Stamp or Seal:

LAURIE HODSON
MY COMMISSION # EE 214728
EXPIRES: July 14, 2016
Bonded Thru Notary Public Underwriters

#32942

U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1–9.

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

SECTION A – PROPERTY INFORMATION

FOR INSURANCE COMPANY USE
Policy Number:
Company NAIC Number:

A1. Building Owner's Name Richard Jordan

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
1019 SW Washington Avenue
City Ft. White State FL ZIP Code 32038

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
Lot 64 Three Rivers Estates Unit 10 / 00-00-00-00792-000

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

A5. Latitude/Longitude: Lat. 29*56.359' Long. 82*47.306' 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) N/A sq ft
- b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A
- c) Total net area of flood openings in A8.b N/A sq in
- d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:
- a) Square footage of attached garage N/A sq ft
- b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A
- c) Total net area of flood openings in A9.b N/A sq in
- d) Engineered flood openings? ☐ Yes ☒ No

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number	B2. County Name	B3. State
Columbia 120070	Columbia	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)
12023C0458C	C	04 Feb 2009	04 Feb 2009	AE	33

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: _____

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: spike in power pole Vertical Datum: NAVD 88
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)	38.35	☒ feet	☐ meters
b) Top of the next higher floor	N.A	☐ feet	☐ meters
c) Bottom of the lowest horizontal structural member (V Zones only)	N.A	☐ feet	☐ meters
d) Attached garage (top of slab)	N.A	☐ feet	☐ meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	N.A	☐ feet	☐ meters
f) Lowest adjacent (finished) grade next to building (LAG)	28.2	☒ feet	☐ meters
g) Highest adjacent (finished) grade next to building (HAG)	28.9	☒ feet	☐ meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	N.A	☐ 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.
☒ Check here if attachments.

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

PLACE SEAL HERE

Certifier's Name L. Scott Britt License Number LS 5757
Title Chief Surveyor Company Name Britt Surveying and Mapping, LLC
Address 2086 SW Main Blvd. #112 City Lake City State FL ZIP Code 32025
Signature [signature] Date 06/16/15 Telephone 386-752-7163

IMPORTANT: In these spaces, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1019 SW Washington Avenue	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 L-23671
See Attachment

Signature Date 06/22/15

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's 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–G10) 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 Improvement

G8. 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.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1019 SW Washington Avenue	FOR INSURANCE COMPANY USE 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 View

Building Photographs

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1019 SW Washington Avenue	FOR INSURANCE COMPANY USE 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 View

BRITT SURVEYING

Land Surveyors and Mappers

LAKE CITY • VENICE • SARASOTA

Section A
A1 No additional comment
A2 The address is taken from the public records
A3 – A4 No additional comment
A5 Hand Held GPS coordinate at the center of building along the front wall
A6 All photographs were taken by Britt Surveying & Mapping, LLC
A7 – A9 No additional comment

Section B
B1 – B7 No additional comment
B8 A portion of this building appears to be in Zone AE.
B9 – B10 The BFE as shown hereon is based on the FIRM
B11 – B12 No additional comment

Section C
C1 No additional comment
C2 There is a benchmark in a an power pole on the west line whose elevation is determined to be 30.5 feet NAVD 88 datum.
C2 a Building main floor
C2 b - h No additional comment

Section D
No additional comment

Section E
No additional comment

Section F
No additional comment

Section G
No additional comment

Photographs
No photographs at this time

Suwannee River Water Management District
Effective Flood Information Report

Effective Flood Zones described on Page 2

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

LOCATION

Date: 06-22-2015

Parcel: 00-00-00-00792-000

County: Columbia

STR: S026 T06 R15

Columbia Flood Hazard Areas Status: Effective: 02/04/2009

FLOOD INFORMATION

FIRM Panel(s): 12023C0458C,12121C0458B

Parcel In Special Flood Hazard Area? (SFHA): Yes

Flood Zone(s): AE

1% Annual Chance Flood Elev (BFE): 33.3 (feet)

Floodway: No

10% Annual Chance Flood Elev: 27.4 (feet)

50% Annual Chance Flood Elev: 21.9 (feet)

Note: Elevations are based on NAVD88

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

Requests to revise flood information in or near designated flood hazard areas may be provided to FEMA during the community review period on preliminary maps, or through the Letter of Map Change process for effective maps.

Base Flood Elevation (BFE)

The elevation shown on the Flood Insurance Rate Map for Zones AE, AH, A1-A30, AR, AO, V1-V30, and VE that indicates the water surface elevation resulting from a flood that has a one percent chance of equaling or exceeding that level in any given year.

A

Areas with a 1% annual chance of flooding and a 26% chance of flooding over the life of a 30-year mortgage. Because detailed analyses are not performed for such areas; no depths or base flood elevations are shown within these zones.

AE, A1-A30

Areas with a 1% annual chance of flooding and a 26% chance of flooding over the life of a 30-year mortgage. In most instances, base flood elevations derived from detailed analyses are shown at selected intervals within these zones.

AH

Areas with a 1% annual chance of flooding and a 26% chance of flooding over the life of a 30-year mortgage. Usually areas of ponding with flood depths of 1 to 3 feet. Base Flood Elevations are determined.

AO

Areas with a 1% annual chance of flooding and a 26% chance of flooding over the life of a 30-year mortgage. Usually areas of sheet flow on sloping terrain with flood depths of 1 to 3 feet. Base Flood Elevations are determined.

Supplemental Information:

10%-chance flood elevations (10-year flood-risk elevations) and 50%-chance flood elevations (2-year flood-risk elevations), are calculated during detailed flooding studies but are not shown on FEMA Digital Flood Insurance Rate Maps (FIRMs). They have been provided as supplemental information in the Flood Information section of this report.

AE FW (FLOODWAYS)

The channel of a river or other watercourse and the adjacent land areas that must be reserved in order to discharge the base flood (1% annual chance flood event). The floodway must be kept open so that flood water can proceed downstream and not be obstructed or diverted onto other properties.

Please note, if you develop within the regulatory floodway, you will need to contact your Local Government and the Suwannee River Water Management District prior to commencing with the activity. Please contact the District at 800.226.1066.

VE

Areas with a 1% annual chance of flooding over the life of a 30-year mortgage with additional hazards due to storm-induced velocity wave action. Base Flood Elevations (BFEs) derived from detailed analyses.

X 0.2 PCT (X Shaded, 0.2 PCT ANNUAL CHANCE FLOOD HAZARD)

Same as Zone X; however, detailed studies have been performed, and the area has been determined to be within the 0.2 percent annual chance floodplain (also known as the 500-year flood zone). Insurance purchase is not required in this zone but is available at a reduced rate and is recommended.

X

All areas outside the 1-percent annual chance floodplain are Zone X. This includes areas of 1% annual chance sheet flow flooding where average depths are less than 1 foot, areas of 1% annual chance stream flooding where the contributing drainage area is less than 1 square mile, or areas protected from the 1% annual chance flood by levees. No Base Flood Elevations or depths are shown within this zone. Insurance purchase is not required in these zones.

LINKS

FEMA:

http://www.fema.gov

SRWMD:

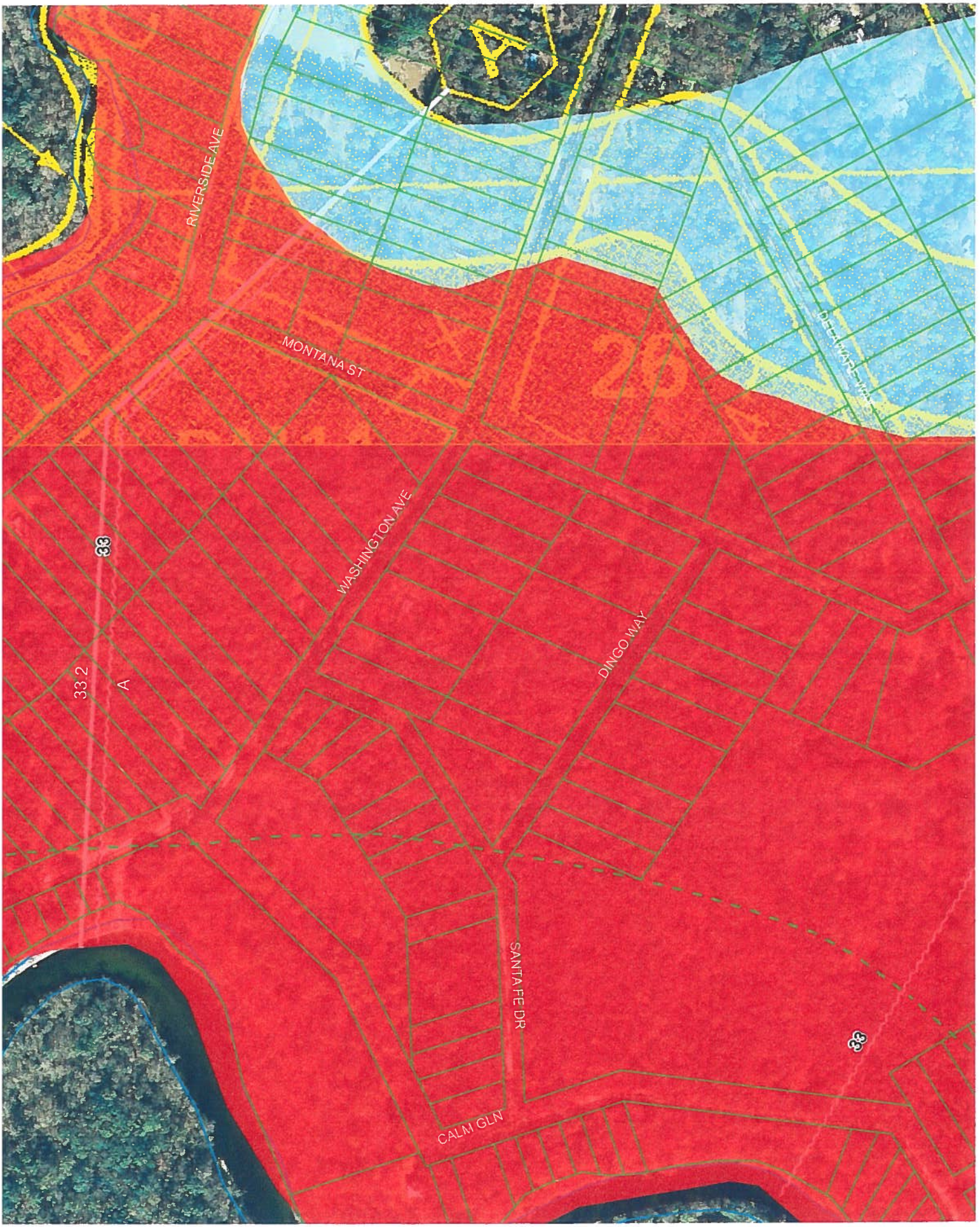
http://www.srwmd.state.fl.us

CONTACT

SRWMD
9225 County Road 49
Live Oak, FL 32060

(386) 362-1001

Toll Free:
(800) 226-1066



60792 - 000 1503 72 Flood Zone AE

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE INDEX* = 77

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

1019 SW Washington Ave, Fort white, 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		1	
5. Is this a worst case?		No	
6. Conditioned floor area (ft²)		624	
7. Windows**	Description		Area
a. U-Factor: SHGC:	Dbl, U=0.50 SHGC=0.25		92.00 ft²
b. U-Factor: SHGC:	N/A		ft²
c. U-Factor: SHGC:	N/A		ft²
d. U-Factor: SHGC:	N/A		ft²
Area Weighted Average Overhang Depth:			0.000 ft.
Area Weighted Average SHGC:			0.250
8. Floor Types		Insulation	Area
a. Crawlspace		R=19.0	624.00 ft²
b. N/A		R=	ft²
c. N/A		R=	ft²

	Insulation	Area
9. Wall Types		
a. Frame - Wood, Exterior	R=13.0	953.75 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	624.00 ft²
b. N/A	R=	ft²
c. N/A	R=	ft²
11. Ducts	R	ft²
a. Sup: Attic, Ret: Attic, AH: Main	6	80

	kBtu/hr	Efficiency
12. Cooling systems		
a. Central Unit	17.6	SEER:14.00
13. Heating systems	kBtu/hr	Efficiency
a. Electric Heat Pump	17.6	HSPF:8.20
14. Hot water systems		
a.		EF:
b. Conservation features		
15. Credits		CF, Pstat

COLUMBIA COUNTY BUILDING DEPARTMENT Received for FILE COPY Code Compliance PLANS EXAMINER

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: Richard Jordan Date: 3/24/15

Address of New Home: 1019 S.W. Washington Ave City/FL Zip: Ft White, FL 32038

GREAT SEAL OF THE STATE OF FLORIDA * IN GOD WE TRUST *

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

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

FORM 405-10

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Business and Professional Regulation - Residential Performance Method

Project Name:	Jordan Manual J	Builder Name:	
Street:	1014 SW Washington Ave	Permit Office:	Columbia
City, State, Zip:	Fort white , FL ,	Permit Number:	
Owner:	Richard Jordan	Jurisdiction:	
Design Location:	FL, Jacksonville		

1. New construction or existing	New (From Plans)	9. Wall Types (953.8 sqft.)	Insulation	Area
2. Single family or multiple family	Single-family	a. Frame - Wood, Exterior	R=13.0	953.75 ft²
3. Number of units, if multiple family	1	b. N/A	R=	ft²
4. Number of Bedrooms	1	c. N/A	R=	ft²
5. Is this a worst case?	No	d. N/A	R=	ft²
6. Conditioned floor area above grade (ft²)	624	10. Ceiling Types (624.0 sqft.)	Insulation	Area
Conditioned floor area below grade (ft²)	0	a. Under Attic (Vented)	R=30.0	624.00 ft²
7. Windows(92.0 sqft.)	Description / Area	b. N/A	R=	ft²
a. U-Factor: / SHGC:	Dbl, U=0.50 / SHGC=0.25	c. N/A	R=	ft²
	92.00 ft²	11. Ducts		R ft²
b. U-Factor: / SHGC:	N/A ft²	a. Sup: Attic, Ret: Attic, AH: Main		6 80
c. U-Factor: / SHGC:	N/A ft²	12. Cooling systems	kBtu/hr	Efficiency
d. U-Factor: / SHGC:	N/A ft²	a. Central Unit	17.6	SEER:14.00
Area Weighted Average Overhang Depth:	0.000 ft.	13. Heating systems	kBtu/hr	Efficiency
Area Weighted Average SHGC:	0.250	a. Electric Heat Pump	17.6	HSPF:8.20
8. Floor Types (624.0 sqft.)	Insulation / Area	14. Hot water systems		
a. Crawlspace	R=19.0 / 624.00 ft²	a.		EF: 0.000
b. N/A	R= ft²	b. Conservation features		
c. N/A	R= ft²	15. Credits		CF, Pstat

Glass/Floor Area: 0.147

Total Proposed Modified Loads: 19.18
Total Standard Reference Loads: 25.02

PASS

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

PREPARED BY: David Marrs
DATE: 3/16/15

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

OWNER/AGENT: Richard Jordan
DATE: 3/24/15

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**

PROJECT

Title:	Jordan Manual J	Bedrooms:	1	Address Type:	Street Address
Building Type:	User	Conditioned Area:	624	Lot #	
Owner:	Richard Jordan	Total Stories:	1	Block/SubDivision:	
# of Units:	1	Worst Case:	No	PlatBook:	
Builder Name:		Rotate Angle:	0	Street:	1014 SW Washington A
Permit Office:	Columbia	Cross Ventilation:	No	County:	Columbia
Jurisdiction:		Whole House Fan:	No	City, State, Zip:	Fort white , FL ,
Family Type:	Single-family				
New/Existing:	New (From Plans)				
Comment:					

CLIMATE

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

BLOCKS

Number	Name	Area	Volume
1	Block1	624	4992

SPACES

Number	Name	Area	Volume	Kitchen	Occupants	Bedrooms	Infil ID	Finished	Cooled	Heated
1	Main	624	4992	Yes	2	1	1	Yes	Yes	Yes

FLOORS

√	#	Floor Type	Space	Exposed Perim	Wall Ins. R-Value	Area	Floor Joist R-Value	Tile	Wood	Carpet
_____	1	Crawlspace	Main	100 ft	0	624 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	Composition shingles	658 ft²	104 ft²	Medium	0.9	N	0.9	No	0	18.4

ATTIC

√	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
_____	1	Full attic	Vented	300	624 ft²	N	N

CEILING

√	#	Ceiling Type	Space	R-Value	Area	Framing Frac	Truss Type
_____	1	Under Attic (Vented)	Main	30	624 ft²	0.1	Wood

WALLS

√	#	Ornt	Adjacent To	Wall Type	Space	Cavity R-Value	Width Ft	Width In	Height Ft	Height In	Area	Sheathing R-Value	Framing Fraction	Solar Absor.	Below Grade%
___	1	N	Exterior	Frame - Wood	Main	13	26	0	9	0	234.0 ft²	0	0.25	0.8	0
___	2	E	Exterior	Frame - Wood	Main	13	25	9	9	0	231.8 ft²	0	0.25	0.8	0
___	3	S	Exterior	Frame - Wood	Main	13	26	0	10	0	260.0 ft²	0	0.25	0.8	0
___	4	W	Exterior	Frame - Wood	Main	13	25	4	9	0	228.0 ft²	0	0.25	0.8	0

DOORS

√	#	Ornt	Door Type	Space	Storms	U-Value	Width Ft	Width In	Height Ft	Height In	Area
_____	1	S	Wood	Main	None	.39	3		7		21 ft²
_____	2	W	Wood	Main	None	.39	3		7		21 ft²

WINDOWS

Orientation shown is the entered, Proposed orientation.

√	#	Ornt	Wall ID	Frame	Panes	NFRC	U-Factor	SHGC	Area	Overhang Depth	Overhang Separation	Int Shade	Screening
_____	1	n	1	Metal	Low-E Double	Yes	0.5	0.25	18.0 ft²	0 ft 0 in	0 ft 0 in	None	None
_____	2	e	2	Metal	Low-E Double	Yes	0.5	0.25	9.0 ft²	0 ft 0 in	0 ft 0 in	None	None
_____	3	s	3	Metal	Low-E Double	Yes	0.5	0.25	30.0 ft²	0 ft 0 in	0 ft 0 in	None	None
_____	4	W	4	Metal	Low-E Double	Yes	0.5	0.25	35.0 ft²	0 ft 0 in	0 ft 0 in	None	None

INFILTRATION

#	Scope	Method	SLA	CFM 50	ELA	EqLA	ACH	ACH 50
1	Wholehouse	Best Guess	.0003	491	26.96	50.7	.231	5.9018

HEATING SYSTEM

√	#	System Type	Subtype	Efficiency	Capacity	Block	Ducts
_____	1	Electric Heat Pump	None	HSPF: 8.2	17.6 kBtu/hr	1	sys#1

COOLING SYSTEM

√	#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Block	Ducts
_____	1	Central Unit	Split	SEER: 14	17.6 kBtu/hr	cfm	0.7	1	sys#1

SOLAR HOT WATER SYSTEM

√	FSEC Cert #	Company Name	System Model #	Collector Model #	Collector Area	Storage Volume	FEF
_____					ft²		

DUCTS

√	#	---- Supply ---- Location	R-Value	Area	---- Return ---- Location	Area	Leakage Type	Air Handler	CFM 25 TOT	CFM25 OUT	QN	RLF	HVAC # Heat	HVAC # Cool
_____	1	Attic	6	80 ft²	Attic	40 ft²	Default Leakage	Main	(Default)	(Default)			1	1

TEMPERATURES

Programable Thermostat: Y

Ceiling Fans:

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

FORM 405-10

Florida Code Compliance Checklist

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

ADDRESS: 1014 SW Washington Ave
Fort white, FL,

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	403.2.2 403.3.3	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. 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.	

MARRS
HVAC SERVICES, LLC

Load Short Form
Entire House

Job: Jordan Residence
Date: Mar 16, 2015
By: DJM

Project Information

For: Richard Jordan
1019 SW Washington Ave, Fort white, FL
1019

Design Information

	Htg	Clg
Outside db (°F)	34	93
Inside db (°F)	70	75
Design TD (°F)	36	18
Daily range	-	M
Inside humidity (%)	30	50
Moisture difference (gr/lb)	10	50

Infiltration

Method	Simplified
Construction quality	Average
Fireplaces	0

HEATING EQUIPMENT

Make	Trane
Trade	TRANE
Model	4TWR4018D1
AHRI ref	7416072

Efficiency	8.2 HSPF
Heating input	
Heating output	17000 Btuh @ 47°F
Temperature rise	26 °F
Actual air flow	587 cfm
Air flow factor	0.052 cfm/Btuh
Static pressure	0.53 in H2O
Space thermostat	

COOLING EQUIPMENT

Make	Trane
Trade	TRANE
Cond	4TWR4018D1
Coil	GAF2A0A18S11++TDR
AHRI ref	7416072

Efficiency	11.5 EER, 14 SEER
Sensible cooling	12320 Btuh
Latent cooling	5280 Btuh
Total cooling	17600 Btuh
Actual air flow	587 cfm
Air flow factor	0.044 cfm/Btuh
Static pressure	0.53 in H2O
Load sensible heat ratio	0.84

ROOM NAME	Area (ft²)	Htg load (Btuh)	Clg load (Btuh)	Htg AVF (cfm)	Clg AVF (cfm)
Bedroom	132	2792	4347	144	192
Bath	72	1009	636	52	28
Laundry	48	1211	983	63	44
Living/Kitchen	372	6333	7300	328	323
Entire House	624	11346	13266	587	587
Other equip loads		0	0		
Equip. @ 0.98 RSM			13001		
Latent cooling			2467		
TOTALS	624	11346	15468	587	587

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

Alpine, an ITW Company

2400 Lake Orange Drive suite 150 Orlando FL 32837
Florida Engineering Certificate of Authorization Number: 0 278
Florida Certificate of Product Approval # FL1999
 Document ID:1VEZ9114Z0120164140

Truss Fabricator:	Anderson Truss Company
Job Identification:	15-046--OWNER BUILDER /Jordan Cabin Roof -- 1014 SW Washington Ave STATE OF FL
Truss Count:	5
Model Code:	Florida Building Code 2014 or 2010
Truss Criteria:	FBC2010Res/TPI-2007(STD)
Engineering Software:	Alpine Software,Version 14.03.
Structural Engineer of Record:	The identity of the structural EOR did not exist as of
Address:	the seal date per section 61G15-31.003(5a) of the FAC
Minimum Design Loads:	Roof - 37.0 PSF @ 1.25 Duration
	Floor - N/A
	Wind - 130 MPH ASCE 7-10 -Closed

03/20/2015

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: HCUSR9114

William H. Krick
-Truss Design Engineer-

2400 Lake Orange Dr, Suite 150
Orlando FL, 32837

Details: -

#	Ref	Description	Drawing#	Date
1	07263	A 26' Common	15079004	03/20/15
2	07264	A1 26' Common	15079005	03/20/15
3	07265	ADGE 26' Gable	15079006	03/20/15
4	07266	B 9' Common	15079007	03/20/15
5	07267	BDGE 9' Gable	15079008	03/20/15

THIS DWG PREPARED FROM COMPUTER INPUT (LOADS & DIMENSIONS) SUBMITTED BY TRUSS MFR.

(15-046--OWNER BUILDER /Jordan Cabin Roof -- 1014 SW Washington Ave Ft. White, FL - A 26' Common)

Value Set: 13B (Effective 6/1/2013)

Top chord 2x4 SP #1
Bot chord 2x4 SP #1
Webs 2x4 SP #3

Lumber value set "13B" uses design values approved 1/30/2013 by ALSC

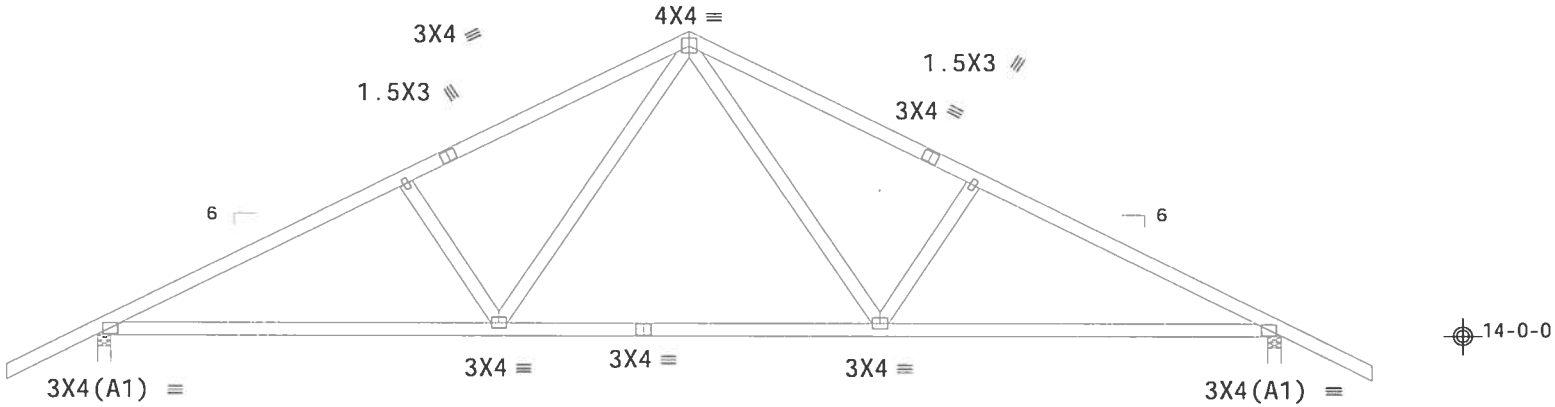
Bottom chord checked for 10.00 psf non-concurrent live load.

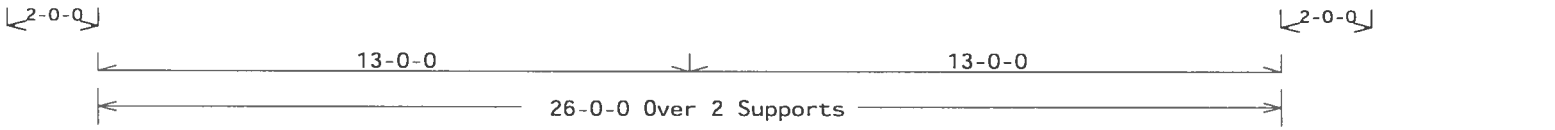
Deflection meets L/240 live and L/180 total load. Creep increase factor for dead load is 1.50.

130 mph wind, 17.10 ft mean hgt, ASCE 7-10, CLOSED bldg, Located anywhere in roof, RISK CAT II, EXP B, wind TC DL=3.5 psf, wind BC DL=5.0 psf. GCpi(+/-)=0.18

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

Truss passed check for 20 psf additional bottom chord live load in areas with 42"-high x 24"-wide clearance.





R=1169 U=133 W=3.5"
RL=149/-149

R=1169 U=133 W=3.5"

Design Crit: FBC2010Res/TPI-2007(STD)

PLT TYP. Wave FT/RT=10%(0%)/0(0) 14.03.01.0123.00 QTY:10 FL/-/5/-/-/R/- Scale =.25"/Ft.

ALPINE AN ITW COMPANY

2400 Lake Orange Dr. Suite 150
Orlando, FL 32837
FL COA #0 278

WARNING! READ AND FOLLOW ALL NOTES ON THIS DRAWING!
IMPORTANT FURNISH THIS DRAWING TO ALL CONTRACTORS INCLUDING THE INSTALLERS.

Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to and follow the latest edition of BCSI (Building Component Safety Information, by TPI and WTCA) for safety practices prior to performing these functions. Installers shall provide temporary bracing per BCSI. Unless noted otherwise, top chord shall have properly attached structural sheathing and bottom chord shall have a properly attached rigid ceiling. Locations shown for permanent lateral restraint of webs shall have bracing installed per BCSI sections B3, B7 or B10, as applicable. Apply plates to each face of truss and position as shown above and/or on the Joint Details, unless noted otherwise. Refer to drawings 160A-Z for standard plate positions.

Alpine, a division of ITW Building Components Group Inc., shall not be responsible for any deviation from this drawing, any failure to build the truss in conformance with ANSI/TPI 1, or for handling, shipping, installation & bracing of trusses.

A seal on this drawing or cover page listing this drawing, indicates acceptance of professional engineering responsibility solely for the design shown. The suitability and use of this drawing for any structure is the responsibility of the Building Designer per ANSI/TPI 1 Sec.2.

For more information see this job's general notes page and these web sites:
ALPINE www.alpineitw.com TPI www.tpinst.org WTCA www.sbcindustry.com, ICC www.iccsafe.org

WILLIAM H. KRICK
LICENSE
No. 70861
STATE OF
FLORIDA
PROFESSIONAL ENGINEER
03/20/2015

TC LL	20.0 PSF	REF	R9114- 7263
TC DL	7.0 PSF	DATE	03/20/15
BC DL	10.0 PSF	DRW	HCUSR9114 15079004
BC LL	0.0 PSF	HC-ENG	SSB/WHK
TOT.LD.	37.0 PSF	SEQN-	429291
DUR.FAC.	1.25	FROM	JMW
SPACING	24.0"	JREF-	1VEZ9114Z01

THIS DWG PREPARED FROM COMPUTER INPUT (LOADS & DIMENSIONS) SUBMITTED BY TRUSS MFR.

(15-046--OWNER BUILDER /Jordan Cabin Roof -- 1014 SW Washington Ave Ft. White, FL - A1 26' Common)

Value Set: 13B (Effective 6/1/2013)

Top chord 2x4 SP #1
Bot chord 2x4 SP #1
Webs 2x4 SP #3

Lumber value set "13B" uses design values approved 1/30/2013 by ALSC

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

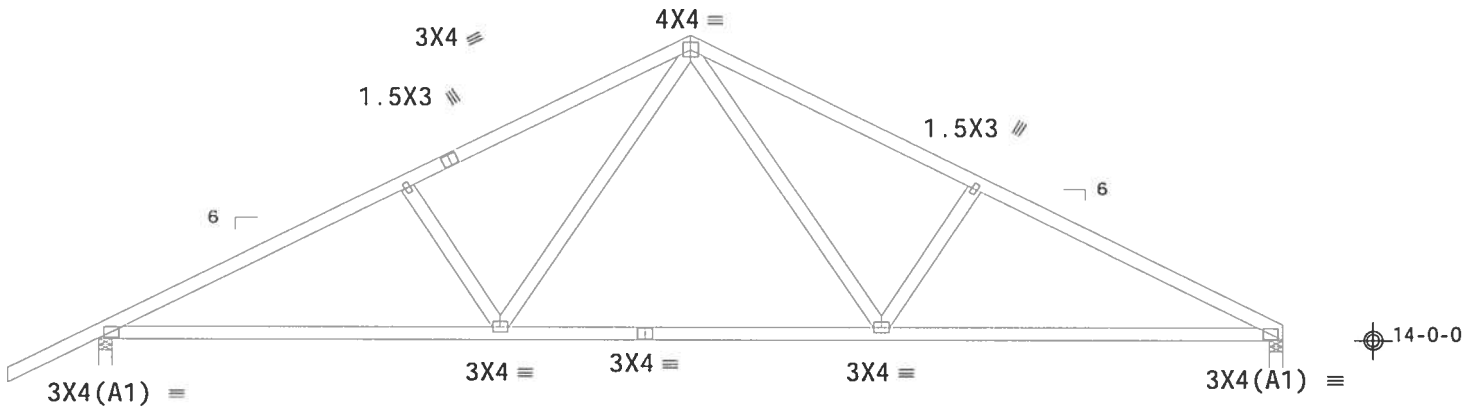
Deflection meets L/240 live and L/180 total load. Creep increase factor for dead load is 1.50.

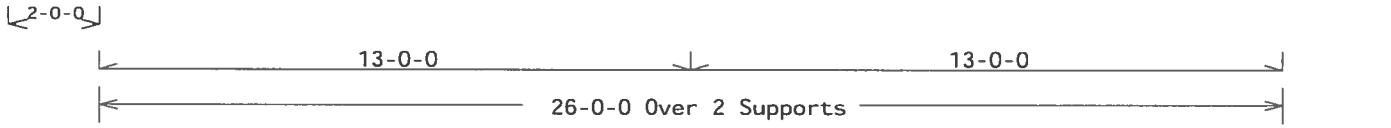
130 mph wind, 17.10 ft mean hgt, ASCE 7-10, CLOSED bldg, not located within 9.00 ft from roof edge, RISK CAT II, EXP B, wind TC DL=3.5 psf, wind BC DL=5.0 psf. GCpi(+/-)=0.18

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

Truss passed check for 20 psf additional bottom chord live load in areas with 42"-high x 24"-wide clearance.

MWFRS loads based on trusses located at least 8.55 ft. from roof edge.





R=1174 U=107 W=3.5"
RL=127/-135

R=1043 U=80 W=3.5"

Design Crit: FBC2010Res/TPI-2007(STD)

PLT TYP. Wave | FT/RT=10%(0%)/0(0) | 14.03-01-0123.00 | QTY:5 | FL/-/5/-/-/R/- | Scale =.25"/Ft.

ALPINE AN ITW COMPANY

2400 Lake Orange Dr. Suite 150
Orlando, FL 32837
FL COA #0 278

WARNING! READ AND FOLLOW ALL NOTES ON THIS DRAWING!
IMPORTANT FURNISH THIS DRAWING TO ALL CONTRACTORS INCLUDING THE INSTALLERS.

Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to, and follow the latest edition of BCSI (Building Component Safety Information, by TPI and WTCA) for safety practices prior to performing these functions. Installers shall provide temporary bracing per BCSI. Unless noted otherwise, top chord shall have properly attached structural sheathing and bottom chord shall have a properly attached rigid ceiling. Locations shown for permanent lateral restraint of webs shall have bracing installed per BCSI sections B3, B7 or B10, as applicable. Apply plates to each face of truss and position as shown above and/or on the Joint Details, unless noted otherwise. Refer to drawings 160A-Z for standard plate positions.

Alpine, a division of ITW Building Components Group Inc., shall not be responsible for any deviation from this drawing, any failure to build the truss in conformance with ANSI/TPI 1, or for handling, shipping, installation & bracing of trusses.

A seal on this drawing or cover page listing this drawing, indicates acceptance of professional engineering responsibility solely for the design shown. The suitability and use of this drawing for any structure is the responsibility of the Building Designer per ANSI/TPI 1 Sec 2.

For more information see this job's general notes page and these web sites:
ALPINE www.alpineitw.com TPI www.tpinst.org WTCA www.sbcindustry.com ICC www.iccsafe.org

WILLIAM H. KRICK
LICENSE
No. 70861
STATE OF FLORIDA
PROFESSIONAL ENGINEER
03/20/2015

TC LL	20.0 PSF	REF R9114- 7264
TC DL	7.0 PSF	DATE 03/20/15
BC DL	10.0 PSF	DRW HCUSR9114 15079005
BC LL	0.0 PSF	HC-ENG SSB/WHK
TOT.LD.	37.0 PSF	SEQN- 429292
DUR.FAC.	1.25	FROM JMW
SPACING	24.0"	JREF- 1VEZ9114Z01

THIS DWG PREPARED FROM COMPUTER INPUT (LOADS & DIMENSIONS) SUBMITTED BY TRUSS MFR.

(15-046--OWNER BUILDER /Jordan Cabin Roof -- 1014 SW Washington Ave Ft. White, FL - ADGE 26' Gable)

Value Set: 13B (Effective 6/1/2013)

Top chord 2x4 SP #1
Bot chord 2x4 SP #1
Webs 2x4 SP #3
:Stack Chord SC1 2x4 SP #1::Stack Chord SC2 2x4 SP #1:

Lumber value set "13B" uses design values approved 1/30/2013 by ALSC

Stacked top chord must NOT be notched or cut in area (NNL). Dropped top chord braced at 24" o.c. intervals. Attach stacked top chord (SC) to dropped top chord in notchable area using 3x4 tie-plates 24" o.c. Center plate on stacked/dropped chord interface, plate length perpendicular to chord length. Splice top chord in notchable area using 3x6.

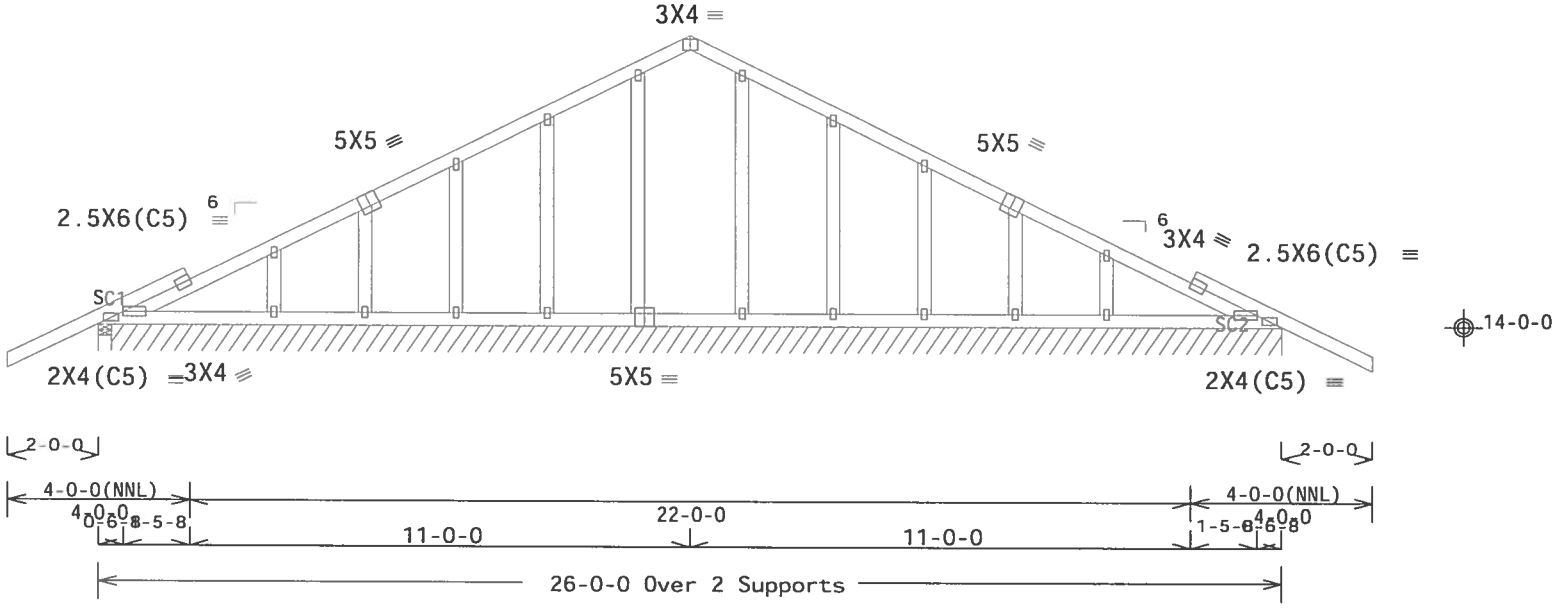
130 mph wind, 16.93 ft mean hgt, ASCE 7-10, CLOSED bldg, Located anywhere in roof, RISK CAT II, EXP B, wind TC DL=3.5 psf, wind BC DL=5.0 psf. GCpi(+/-)=0.18

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

Truss designed to support 2-0-0 top chord outlookers and 10.00 PSF cladding load one face, and 24.0" span on opposite face. Top chord must not be cut or notched.

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

Deflection meets L/240 live and L/180 total load. Creep increase factor for dead load is 1.50.



Note: All Plates Are 1.5X3 Except As Shown.

Design Crit: FBC2010Res/TPI-2007(STD)

PLT TYP. Wave FT/RT=10%(0%)/0(0) 14.03.01.0123.00 QTY:2 FL/-/5/-/-/R/- Scale =.25"/Ft.

ALPINE AN ITW COMPANY

2400 Lake Orange Dr, Suite 150
Orlando, FL 32837
FL COA #0 278

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For more information see this job's general notes page and these web sites:
ALPINE www.alpineitw.com TPI www.tpinst.org WTCA www.sbcindustry.com ICC www.iccsafe.org

WILLIAM H. KRICK
LICENSE
No. 70861
STATE OF FLORIDA
PROFESSIONAL ENGINEER
03/20/2015

TC LL	20.0 PSF	REF R9114- 7265
TC DL	7.0 PSF	DATE 03/20/15
BC DL	10.0 PSF	DRW HCUSR9114 15079006
BC LL	0.0 PSF	HC-ENG SSB/WHK
TOT.LD.	37.0 PSF	SEQN- 430109
DUR.FAC.	1.25	FROM JMW
SPACING	24.0"	JREF- 1VEZ9114Z01

THIS DWG PREPARED FROM COMPUTER INPUT (LOADS & DIMENSIONS) SUBMITTED BY TRUSS MFR.

(15-046--OWNER BUILDER /Jordan Cabin Roof -- 1014 SW Washington Ave Ft. White, FL - B 9' Common)

Value Set: 13B (Effective 6/1/2013)

Top chord 2x4 SP #1
Bot chord 2x4 SP #1

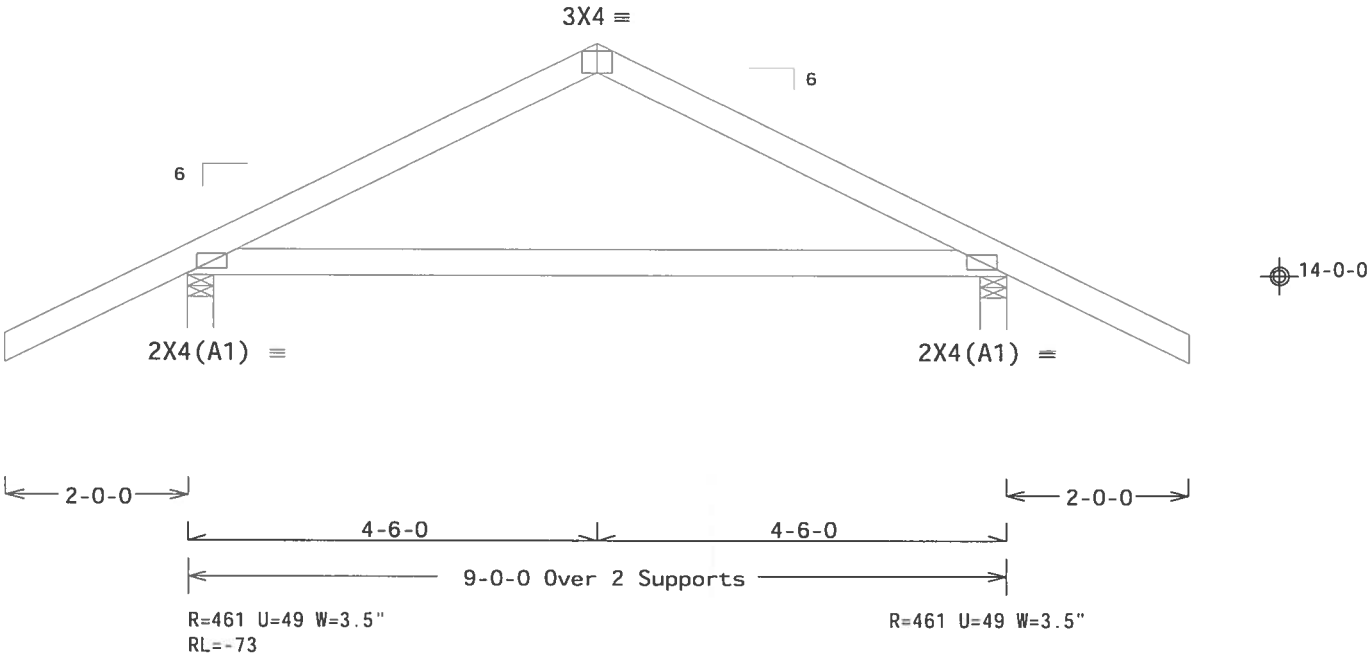
Lumber value set "13B" uses design values approved 1/30/2013 by ALSC

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

130 mph wind, 15.00 ft mean hgt, ASCE 7-10, CLOSED bldg, Located anywhere in roof, RISK CAT II, EXP B, wind TC DL=3.5 psf, wind BC DL=5.0 psf. GCpi(+/-)=0.18

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

Deflection meets L/240 live and L/180 total load. Creep increase factor for dead load is 1.50.



Design Crit: FBC2010Res/TPI-2007(STD)

PLT TYP. Wave | FT/RT=10%(0%)/0(0) | 14.03-01-0123.00 | QTY:3 | FL/-/5/-/-/R/- | Scale =.5"/Ft.

ALPINE AN ITW COMPANY

2400 Lake Orange Dr. Suite 150
Orlando, FL 32837
FL COA #0 278

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For more information see this job's general notes page and these web sites:
ALPINE www.alpineitw.com, TPI www.tpinst.org, WTCA www.sbcindustry.com, ICC www.iccsafe.org

WILLIAM H. KRICK
LICENSE
No. 70861
STATE OF FLORIDA
PROFESSIONAL ENGINEER
03/20/2015

TC LL	20.0 PSF	REF	R9114- 7266
TC DL	7.0 PSF	DATE	03/20/15
BC DL	10.0 PSF	DRW	HCUSR9114 15079007
BC LL	0.0 PSF	HC-ENG	SSB/WHK
TOT.LD.	37.0 PSF	SEQN-	429294
DUR.FAC.	1.25	FROM	JMW
SPACING	24.0"	JREF-	1VEZ9114Z01

THIS DWG PREPARED FROM COMPUTER INPUT (LOADS & DIMENSIONS) SUBMITTED BY TRUSS MFR.

(15-046--OWNER BUILDER /Jordan Cabin Roof -- 1014 SW Washington Ave Ft. White, FL - BDGE 9' Gable)

Value Set: 13B (Effective 6/1/2013)

Top chord 2x4 SP #1
Bot chord 2x4 SP #1
Webs 2x4 SP #3
:Stack Chord SC1 2x4 SP #1::Stack Chord SC2 2x4 SP #1:

Lumber value set "13B" uses design values approved 1/30/2013 by ALSC

Stacked top chord must NOT be notched or cut in area (NNL). Dropped top chord braced at 24" o.c. intervals. Attach stacked top chord (SC) to dropped top chord in notchable area using 3x4 tie-plates 24" o.c. Center plate on stacked/dropped chord interface, plate length perpendicular to chord length. Splice top chord in notchable area using 3x6.

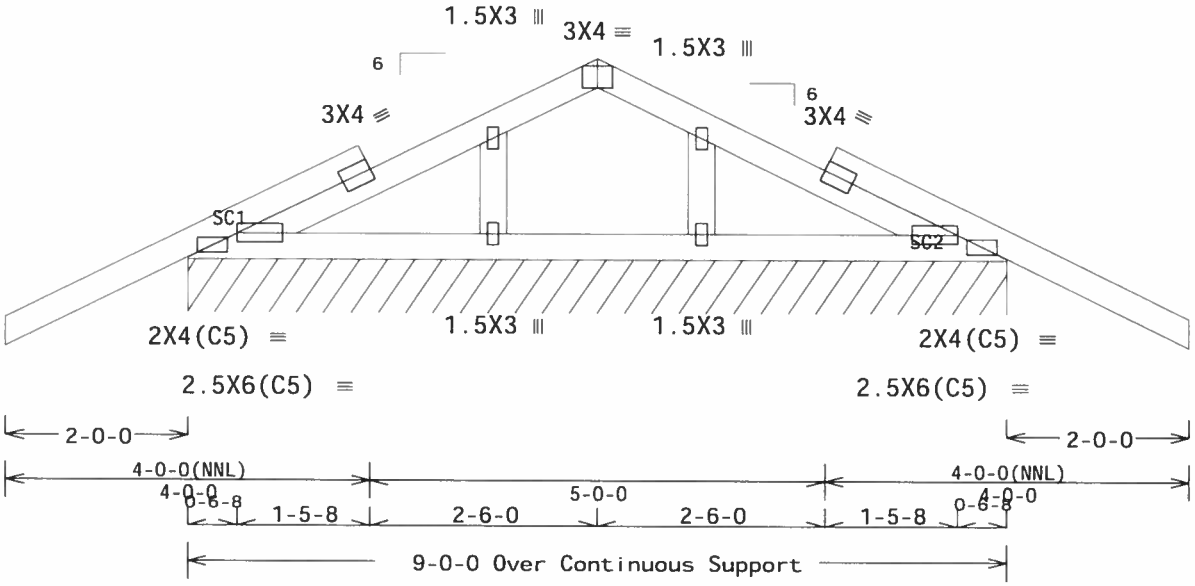
130 mph wind, 15.00 ft mean hgt, ASCE 7-10, CLOSED bldg, Located anywhere in roof, RISK CAT II, EXP B, wind TC DL=3.5 psf, wind BC DL=5.0 psf. GCpi(+/-)=0.18

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

Truss designed to support 2-0-0 top chord outlookers and 10.00 PSF cladding load one face, and 24.0" span on opposite face. Top chord must not be cut or notched.

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

Deflection meets L/240 live and L/180 total load. Creep increase factor for dead load is 1.50.



14-0-0

R=202 PLF U=112 PLF W=9-0-0
RL=16/-16 PLF

Design Crit: FBC2010Res/TPI-2007(STD)

PLT TYP. Wave | FT/RT=10%(0%)/0(0) | 14.03.01.0123.00 | QTY:1 | FL/-/5/-/-/R/- | Scale =.5"/Ft.

ALPINE AN ITW COMPANY
2400 Lake Orange Dr., Suite 150
Orlando, FL 32837
FL COA #0 278

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For more information see this job's general notes page and these web sites:
ALPINE www.alpinoitw.com; TPI www.tpinst.org; WTCA www.sbcindustry.com; ICC www.iccsafe.org

WILLIAM H. KRICK LICENSE No. 70861 STATE OF FLORIDA PROFESSIONAL ENGINEER
03/20/2015

TC LL	20.0 PSF	REF	R9114- 7267
TC DL	7.0 PSF	DATE	03/20/15
BC DL	10.0 PSF	DRW	HCUSR9114 15079008
BC LL	0.0 PSF	HC-ENG	SSB/WHK
TOT.LD.	37.0 PSF	SEQN-	430112
DUR.FAC.	1.25	FROM	JMW
SPACING	24.0"	JREF-	1VEZ9114Z01

U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read 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 Richard Jordan — Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1019 SW Washington Avenue — 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 64 Three Rivers Estates Unit 10 / 00-00-00-00792-000

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

A5. Latitude/Longitude: Lat. 29*56.359' Long. 82*47.306' 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) N/A sq ft
- b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A
- c) Total net area of flood openings in A8.b N/A sq in
- d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:
- a) Square footage of attached garage N/A sq ft
- b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A
- c) Total net area of flood openings in A9.b N/A sq in
- d) Engineered flood openings? ☐ Yes ☒ No

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number	B2. County Name	B3. State
Columbia 120070	Columbia	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)
12023C0458C	C	04 Feb 2009	04 Feb 2009	AE	33

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: _____

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: spike in power pole Vertical Datum: NAVD 88

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)	38.54	☒ feet	☐ meters
b) Top of the next higher floor	N.A	☐ feet	☐ meters
c) Bottom of the lowest horizontal structural member (V Zones only)	N.A	☐ feet	☐ meters
d) Attached garage (top of slab)	N.A	☐ feet	☐ meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	33.86	☒ feet	☐ meters
f) Lowest adjacent (finished) grade next to building (LAG)	28.2	☒ feet	☐ meters
g) Highest adjacent (finished) grade next to building (HAG)	28.9	☒ feet	☐ meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	N.A	☐ feet	☐ meters

Must be redone

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.
☒ Check here if attachments.

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

PLACE SEAL HERE

Certifier's Name L. Scott Britt License Number LS 5757

Title Chief Surveyor Company Name Britt Surveying and Mapping, LLC

Address 2086 SW Main Blvd. #112 City Lake City State FL ZIP Code 32025

Signature [signature] Date 10/13/15 Telephone 386-752-7163

IMPORTANT: In these spaces, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1019 SW Washington Avenue	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 L-23789
See Attachment

Signature Date 10/13/15

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's 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–G10) 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 Improvement

G8. 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.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1019 SW Washington Avenue	FOR INSURANCE COMPANY USE 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 View

Building Photographs

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1019 SW Washington Avenue	FOR INSURANCE COMPANY USE 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 View

BRITT SURVEYING

Land Surveyors and Mappers

LAKE CITY • VENICE • SARASOTA

Section A
A1 No additional comment
A2 The address is taken from the public records
A3 – A4 No additional comment
A5 Hand Held GPS coordinate at the center of building along the front wall
A6 All photographs were taken by Britt Surveying & Mapping, LLC
A7 – A9 No additional comment

Section B
B1 – B7 No additional comment
B8 A portion of this building appears to be in Zone AE.
B9 – B10 The BFE as shown hereon is based on the FIRM
B11 – B12 No additional comment

Section C
C1 No additional comment
C2 There is a benchmark in a an power pole on the west line whose elevation is determined to be 30.5 feet NAVD 88 datum.
C2 a Building main floor
C2 b - c No additional comment
C2 d Air conditioner
C2 e - h No additional comment

Section D
No additional comment

Section E
No additional comment

Section F
No additional comment

Section G
No additional comment

Photographs
No photographs at this time

32942

Notice of Preventative Treatments for Termites

(as required by Florida Building Code (FBC) 104.2.6)

SUWANNEE VALLEY TERMITE + PEST CONTROL
6687 175 DR LIVE OAK FL. 32060 386-364-1215
Company Name and Telephone Numbers

1019 SW WASHINGTON AVE
FORT WHITE FL.
Address of Treatment or Lot/Block of Treatment

10-21-15
Date

3:40
Time

Jerry Shuler
Applicator

PREMISE
Product Used

IMIDACLOPRID
Chemical used (active ingredient)

90
Number of gallons applied

1% 55oz.
Percent Concentration

880
Area treated (square feet)

Linear feet treated

Stage of treatment (Horizontal, Vertical, Adjoining Slab, retreat of disturbed area)

As per 104.2.6 - If soil chemical barrier method for termite prevention is used, final exterior treamen shall be completed prior to final building approval.

If this notice is for the final exterior treatment, initial and date this line_____.

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 26-6S-15-00792-000 **Building permit No.** 000032942

Use Classification SFD/UTILITY **Fire:** 168.08

Permit Holder RICHARD JORDAN **Waste:** 176.99

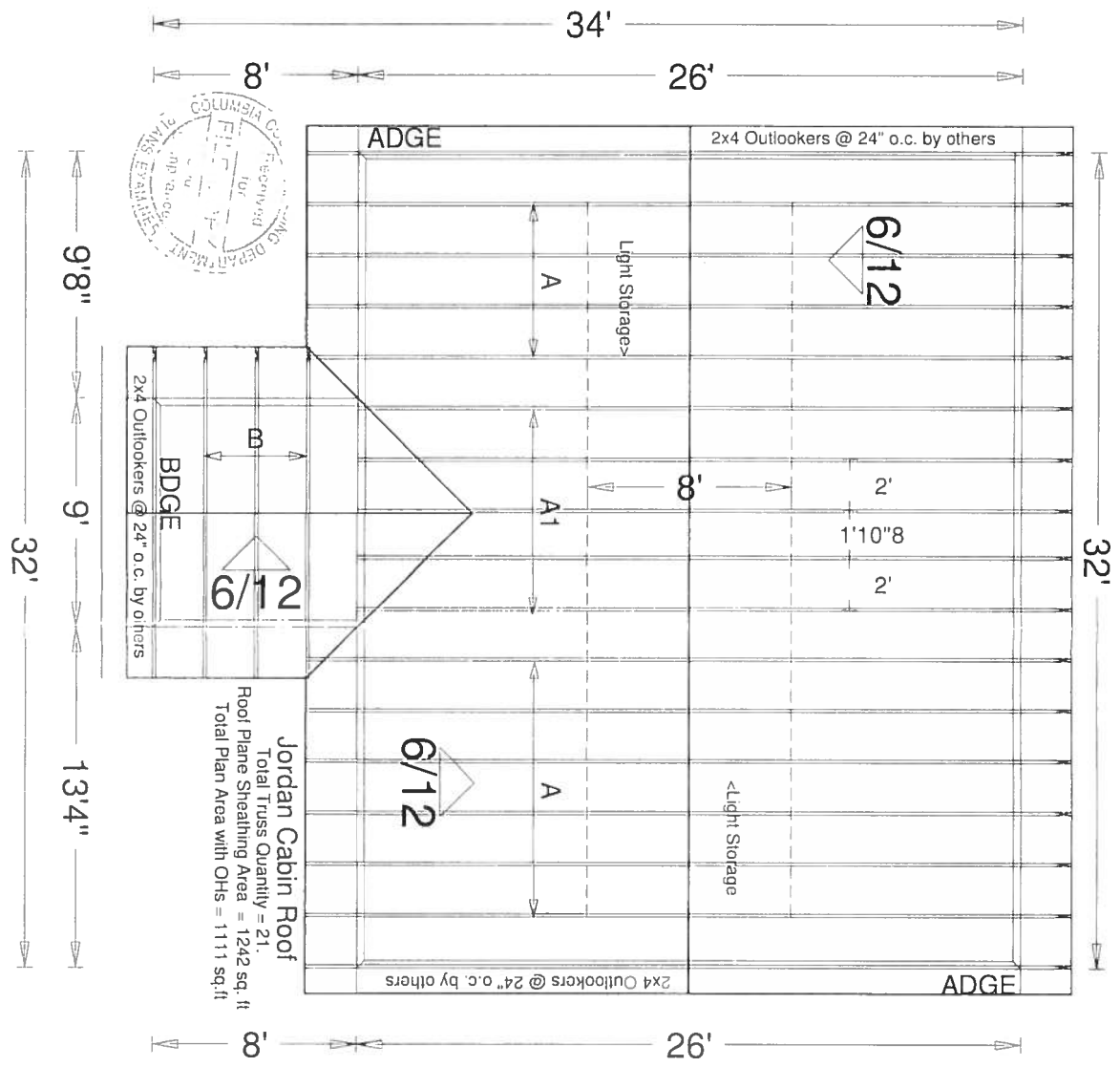
Owner of Building RICHARD JORDAN **Total:** 345.07

Location: 1019 SW WASHINGTON AVE, FT WHITE, FL 32038

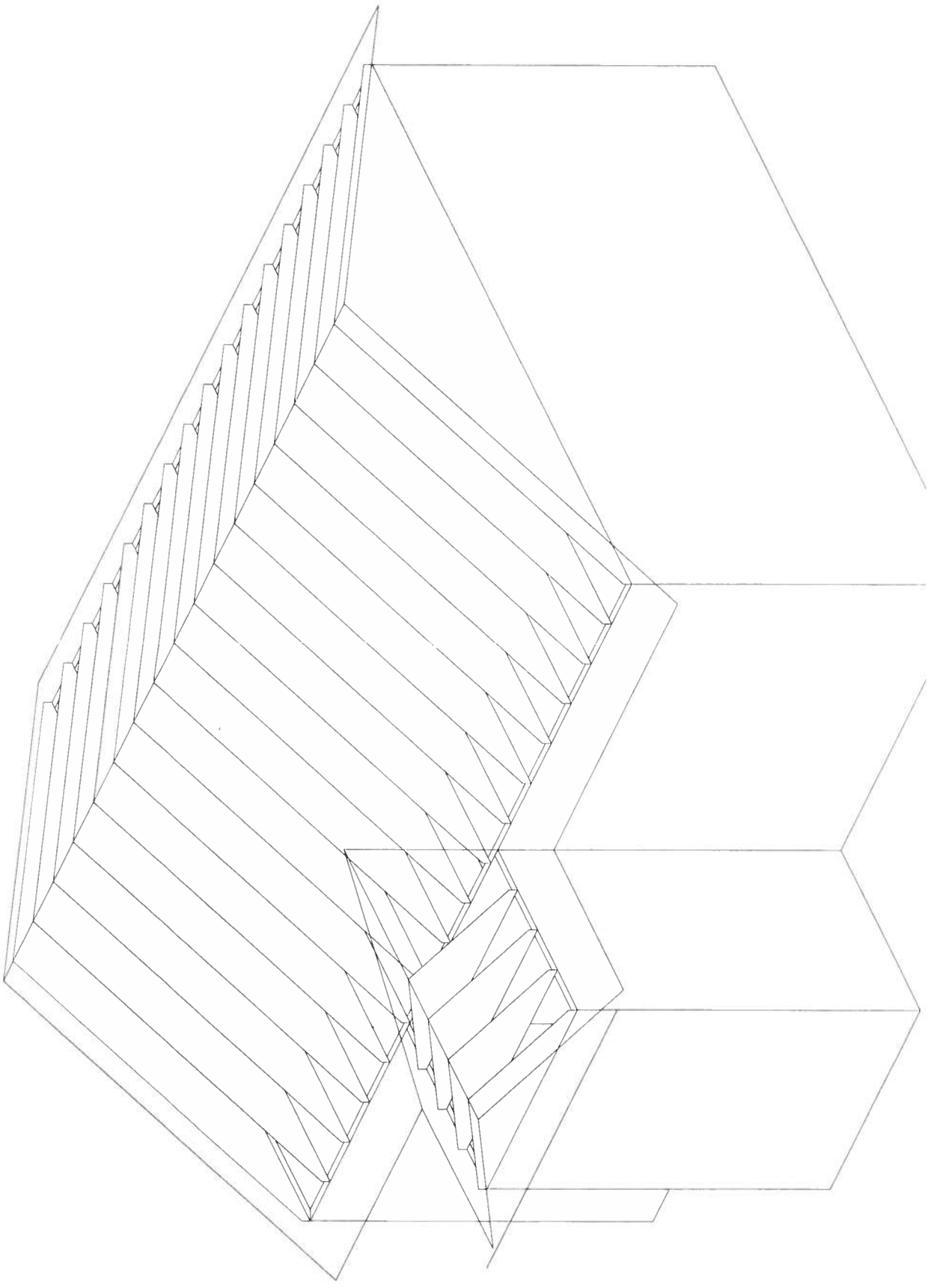
Date: 11/05/2015

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)



PAGE NO:	JOB NO: 15-046	Customer: OWNER BUILDER Job Name: Jordan Cabin Roof : 1014 SW Washington Ave Job Numb: 15-046 Designer: Jon Williams Salesman: CVB	: Created : 03-20-2015 : <Not Found>



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.

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
1. EXTERIOR DOORS			
A. SWINGING	JELD-WEN	METAL DOORS	FL12789-1
B. SLIDING	AMERICAN CRAFTSMAN	6' - 50 SERIES	FL14998 ✓
C. SECTIONAL			
D. ROLL UP			
E. AUTOMATIC			
F. OTHER			
2. WINDOWS			
A. SINGLE HUNG	AMERICAN CRAFTSMAN	50 SERIES	FL14911 ✓
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. DOUBLE HUNG			
E. FIXED			
F. AWNING			
G. PASS THROUGH			
H. PROJECTED			
I. MULLION			
J. WIND BREAKER			
K. DUAL ACTION			
L. OTHER			
3. PANEL WALL			✓
A. SIDING	HARDIE	LAP SIDING	FL13192
B. SOFFITS	AMERIMAX	ALUMINUM VENTED	FL5896 ✓
C. EIFS			
D. STOREFRONTS			
E. CURTAIN WALLS			
F. WALL LOUVER			
G. GLASS BLOCK			
H. MEMBRANE			
I. GREENHOUSE			
J. OTHER			
4. ROOFING PRODUCTS			
A. ASPHALT SHINGLES			
B. UNDERLAYMENTS			
C. ROOFING FASTENERS			
D. NON-STRUCTURAL METAL ROOFING	GULF COAST	GULF RIB	FL11651-22R
E. WOOD SHINGLES AND SHAKES			
F. ROOFING TILES			
G. ROOFING INSULATION			
H. WATERPROOFING			
I. BUILT UP ROOFING ROOF SYSTEMS			
J. MODIFIED BITUMEN			
K. SINGLE PLY ROOF SYSTEMS			
L. ROOFING SLATE			
M. CEMENTS-ADHESIVES COATINGS			

COLUMBIA COUNTY BUILDING DEPARTMENT
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Code Compliance
PLANS EXAMINER

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)