

DATE 03/05/2004

Columbia County Building Permit**PERMIT**

This Permit Expires One Year From the Date of Issue

000021598

APPLICANT JOHN MICHEL PHONE 754-4696
 ADDRESS 157 NW POMPANO COURT LAKE CITY FL 32055
 OWNER JOHN & DEBRA MICHEL PHONE 754-4696
 ADDRESS 157 NW POMPANO COURT LAKE CITY FL 32055
 CONTRACTOR OWNER BUILDER PHONE _____
 LOCATION OF PROPERTY LAKE JEFFREY RD, TL BRINKLEY, TR ON POMPANO COURT,
CORNER LOT
 TYPE DEVELOPMENT SFD, UTILITY ESTIMATED COST OF CONSTRUCTION 94950.00
 HEATED FLOOR AREA 1899.00 TOTAL AREA 2799.00 HEIGHT .00 STORIES 1
 FOUNDATION CONC WALLS FRAMED ROOF PITCH 6/12 FLOOR SLAB
 LAND USE & ZONING A-3 MAX. HEIGHT 22
 Minimum Set Back Requirements: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
 NO. EX.D.U. 0 FLOOD ZONE AE DEVELOPMENT PERMIT NO. F02303027

PARCEL ID 09-3S-16-02049-135 SUBDIVISION ROLLING OAKS
 LOT 35 BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 5.00

Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
 EXISTING 04-0063-N BK _____ JK _____
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: NOC ON FILE,

DECKS WILL NOT BE BUILT AT THIS TIME

Check # or Cash 1032**FOR BUILDING & ZONING DEPARTMENT ONLY**

(footer/Slab)

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

BUILDING PERMIT FEE \$ 475.00 CERTIFICATION FEE \$ 14.00 SURCHARGE FEE \$ 14.00MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ _____ WASTE FEE \$ _____FLOOD ZONE DEVELOPMENT FEE \$ 10.00 CULVERT FEE \$ _____ TOTAL FEE 563.00INSPECTORS OFFICE [Signature] CLERKS OFFICE CH

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

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

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVENIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE

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

**Columbia County
Building Permit Application**

21598

Application No. 0402-39

Date 2-16-04

Applicants Name & Address John F. & Debra B. Michel Phone _____

Owners Name & Address 157 NW Pompano Ct. Phone _____
LAKE CITY, FL 32055

See Simple Owners Name & Address _____ Phone _____
SAME

Contractors Name & Address OWNERS Phone _____

Legal Description of Property 09-35-16-02049-135 Lot 35 Rolling Oaks S/D
CRB 678-607, 987-2105

Location of Property 157 NW Pompano Ct, LAKE JEFFERY RD to BRUNKLEY L
LAKE CITY, FL 32055 R) on Pompano Crt. - corner lot -

Tax Parcel Identification No. 09-35-16-02049-135 Estimated Cost of Construction \$ 125,000.00

Type of Development Single Family Dwelling Number of Existing Dwellings on Property 0

Comprehensive Plan Map Category A-3 Zoning Map Category A-3

Building Height 15' Number of Stories 1 Floor Area 2700 SF Total Acreage in Development 5

Distance From Property Lines (Set Backs) Front 250 Side 20-40' Rear 220 Street _____

Flood Zone N/A AE Certification Date _____ Development Permit YES 125.1'

Bonding Company Name & Address NONE

Architect/Engineer Name & Address MARTIN R. PAGE PE 26767

Mortgage Lenders Name & Address 1240 Dodson Ridge Rd - WALNUT COVE, NC 27052

Application is hereby made to obtain a permit to do the 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 will be performed to meet the standards of all laws regulating construction in this jurisdiction.

OWNERS AFFIDAVIT: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

[Signature]
Owner or Agent (including contractor)

Contractor

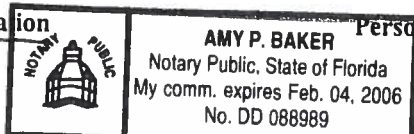
Contractor License Number

STATE OF FLORIDA
COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me
is 2nd day of Feb. 2004 by John F. Michel
Amy Baker

STATE OF FLORIDA
COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me
this _____ day of _____ by _____

Personally Known _____ OR Produced Identification _____

Amy P Baker
Notary



AMY P. BAKER
Notary Public, State of Florida
My comm. expires Feb. 04, 2006
No. DD 088989

Personally Known _____ OR Produced Identification _____

ACCOUNT NUMBER		ESCROW CD	ASSESSED VALUE	EXEMPTIONS	TAXABLE VALUE	MILLAGE CODE
R02049-135			22,500	0	22,500	003

R

0025788 01 AT 0.292 **AUTO HO 1 0810 34997-12



MICHEL JOHN & DEBRA
8288 SW OAK HAMMOCK CT
STEWART FL 34997-7083

09-3S-16 0000/0000
LOT 35 ROLLING OAKS S/D.
ORB 678-607, 987-2105.

AD VALOREM TAXES			
TAXING AUTHORITY	MILLAGE RATE (DOLLARS PER \$1,000 OF TAXABLE VALUE)		TAXES LEVIED
C001 BOARD OF COUNTY COMMISSIONERS	8.7260		196.34
S002 COLUMBIA COUNTY SCHOOL BOARD			
DISCRETIONARY	.7600		17.10
LOCAL	5.6290		126.65
CAPITAL OUTLAY	2.0000		45.00
W SR SUWANNEE RIVER WATER MGT DIST	.4914		11.06
HLSH SHANDS AT LAKE SHORE	1.5000		33.75
IIDA INDUSTRIAL DEVELOPEMENT AUTH	.1380		3.11
TOTAL MILLAGE 19.2444			
AD VALOREM TAXES			\$433.01

NON-AD VALOREM ASSESSMENTS		
LEVYING AUTHORITY	RATE	AMOUNT
FFIR FIRE ASSESSMENTS		5.22
NON-AD VALOREM ASSESSMENTS		\$5.22

COMBINED TAXES AND ASSESSMENTS		\$438.23		PAY ONLY ONE AMOUNT		See reverse side for Important Information.
IF PAID BY	Nov 30	Dec 31	Jan 31	Feb 29	Mar 31	
PLEASE PAY	420.70	425.08	429.47	433.85	438.23	

H. RAY WALKER 2003 REAL ESTATE 01049890000
COLUMBIA COUNTY TAX COLLECTOR

ACCOUNT NUMBER		ESCROW CD	ASSESSED VALUE	EXEMPTIONS	TAXABLE VALUE	MILLAGE CODE
R02049-135			22,500	0	22,500	003

AT0025788 R
MICHEL JOHN & DEBRA

RETAIN
THIS
PORTIO
FOR
YOUR
RECORD

IF PAID
BY

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name:	John and Debbie Michele Residence	Builder:	Terry Zierke
Address:	157 NW Pompano Court	Permitting Office:	Columbia County
City, State:	Lake City, FL 32055-	Permit Number:	21598
Owner:	John and Debbie Michele	Jurisdiction Number:	221000
Climate Zone:	North		

1. New construction or existing	New	___	12. Cooling systems	
2. Single family or multi-family	Single family	___	a. Central Unit	Cap: 36.0 kBtu/hr
3. Number of units, if multi-family	1	___		SEER: 10.00
4. Number of Bedrooms	2	___	b. N/A	___
5. Is this a worst case?	Yes	___	c. N/A	___
6. Conditioned floor area (ft ²)	1899 ft ²	___	13. Heating systems	
7. Glass area & type	Single Pane	Double Pane	a. Electric Heat Pump	Cap: 36.0 kBtu/hr
a. Clear glass, default U-factor	0.0 ft ²	196.7 ft ²		HSPF: 6.80
b. Default tint	0.0 ft ²	0.0 ft ²	b. N/A	___
c. Labeled U or SHGC	0.0 ft ²	0.0 ft ²	c. N/A	___
8. Floor types			14. Hot water systems	
a. Slab-On-Grade Edge Insulation	R=0.0, 220.0(p) ft	___	a. LP Gas	Cap: 50.0 gallons
b. N/A	___			EF: 0.60
c. N/A	___		b. N/A	___
9. Wall types			c. Conservation credits	___
a. Frame, Wood, Exterior	R=19.0, 1554.0 ft ²	___	(HR-Heat recovery, Solar	
b. Frame, Wood, Exterior	R=19.0, 208.0 ft ²	___	DHP-Dedicated heat pump)	
c. Frame, Wood, Adjacent	R=13.0, 320.0 ft ²	___	15. HVAC credits	
d. N/A	___		(CF-Ceiling fan, CV-Cross ventilation,	
e. N/A	___		HF-Whole house fan,	
10. Ceiling types			PT-Programmable Thermostat,	
a. Under Attic	R=30.0, 1957.0 ft ²	___	MZ-C-Multizone cooling,	
b. N/A	___		MZ-H-Multizone heating)	
c. N/A	___			
11. Ducts				
a. Sup: Con. Ret: Con. AH: Interior	Sup. R=6.0, 70.0 ft	___		
b. N/A	___			

Glass/Floor Area: 0.10 Total as-built points: 21622
Total base points: 28275

PASS

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

PREPARED BY: William H. Freeman
DATE: 2/11/04

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

OWNER/AGENT: _____
DATE: _____

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



BUILDING OFFICIAL: _____
DATE: _____

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: 157 NW Pompano Court, Lake City, FL, 32055-

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES											
.18 X Conditioned X BSPM = Points Floor Area				Type/SC	Overhang Ormt Len Hgt		Area X SPM X SOF = Points				
.18	1899.0	20.04	6850.1	Double, Clear	E	3.8	6.7	120.0	42.06	0.69	3461.4
				Double, Clear	S	3.8	6.7	30.0	35.87	0.63	676.6
				Double, Clear	W	3.8	3.5	5.3	38.52	0.51	105.4
				Double, Clear	W	3.8	6.7	5.3	38.52	0.69	142.0
				Double, Clear	W	3.8	6.7	6.0	38.52	0.69	159.8
				Double, Clear	N	3.8	6.7	30.0	19.20	0.81	466.1
				As-Built Total:		196.7			5011.3		
WALL TYPES Area X BSPM = Points				Type	R-Value		Area X SPM = Points				
Adjacent	320.0	0.70	224.0	Frame, Wood, Exterior	19.0		1554.0	0.90	1398.6		
Exterior	1762.0	1.70	2995.4	Frame, Wood, Exterior	19.0		208.0	0.90	187.2		
				Frame, Wood, Adjacent	13.0		320.0	0.60	192.0		
Base Total: 2082.0 3219.4				As-Built Total:		2082.0			1777.8		
DOOR TYPES Area X BSPM = Points				Type			Area X SPM = Points				
Adjacent	40.0	2.40	96.0	Exterior Insulated			20.0	4.10	82.0		
Exterior	140.0	6.10	854.0	Exterior Insulated			120.0	4.10	492.0		
				Adjacent Insulated			40.0	1.60	64.0		
Base Total: 180.0 950.0				As-Built Total:		180.0			638.0		
CEILING TYPES Area X BSPM = Points				Type	R-Value		Area X SPM X SCM = Points				
Under Attic	1899.0	1.73	3285.3	Under Attic	30.0		1957.0	1.73 X 1.00	3385.6		
Base Total: 1899.0 3285.3				As-Built Total:		1957.0			3385.6		
FLOOR TYPES Area X BSPM = Points				Type	R-Value		Area X SPM = Points				
Slab	220.0(p)	-37.0	-8140.0	Slab-On-Grade Edge Insulation	0.0		220.0(p)	-41.20	-9064.0		
Raised	0.0	0.00	0.0								
Base Total: -8140.0				As-Built Total:		220.0			-9064.0		
INFILTRATION Area X BSPM = Points							Area X SPM = Points				
	1899.0	10.21	19388.8				1899.0	10.21	19388.8		

SUMMER CALCULATIONS
Residential Whole Building Performance Method A - Details

ADDRESS: 157 NW Pompano Court, Lake City, FL, 32055-	PERMIT #:
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BASE				AS-BUILT							
Summer Base Points: 25553.5				Summer As-Built Points: 21137.5							
Total Summer Points	X	System Multiplier	= Cooling Points	Total Component	X	Cap Ratio	X Duct Multiplier (DM x DSM x AHU)	X System Multiplier	X Credit Multiplier	= Cooling Points	
25553.5		0.4266	10901.1	21137.5		1.000	(1.000 x 1.147 x 0.91)	0.341	1.000	7530.0	
				21137.5		1.00	1.044	0.341	1.000	7530.0	

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: 157 NW Pompano Court, Lake City, FL, 32055-

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES											
.18 X Conditioned X BWPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt		Area X WPM X WOF = Points				
.18	1899.0	12.74	4354.8	Double, Clear	E	3.8	6.7	120.0	18.79	1.14	2578.5
				Double, Clear	S	3.8	6.7	30.0	13.30	1.80	718.0
				Double, Clear	W	3.8	3.5	5.3	20.73	1.17	129.8
				Double, Clear	W	3.8	6.7	5.3	20.73	1.10	121.3
				Double, Clear	W	3.8	6.7	6.0	20.73	1.10	136.6
				Double, Clear	N	3.8	6.7	30.0	24.58	1.01	745.3
				As-Built Total:		196.7			4429.6		
WALL TYPES Area X BWPM = Points				Type	R-Value		Area X WPM = Points				
Adjacent	320.0	3.60	1152.0	Frame, Wood, Exterior	19.0		1554.0	2.20		3418.8	
Exterior	1762.0	3.70	6519.4	Frame, Wood, Exterior	19.0		208.0	2.20		457.6	
				Frame, Wood, Adjacent	13.0		320.0	3.30		1056.0	
Base Total:				2082.0		7671.4		As-Built Total:		2082.0	
										4932.4	
DOOR TYPES Area X BWPM = Points				Type	R-Value		Area X WPM = Points				
Adjacent	40.0	11.50	460.0	Exterior Insulated			20.0	8.40		168.0	
Exterior	140.0	12.30	1722.0	Exterior Insulated			120.0	8.40		1008.0	
				Adjacent Insulated			40.0	8.00		320.0	
Base Total:				180.0		2182.0		As-Built Total:		180.0	
										1496.0	
CEILING TYPES Area X BWPM = Points				Type	R-Value		Area X WPM X WCM = Points				
Under Attic	1899.0	2.05	3892.9	Under Attic	30.0		1957.0	2.05 X 1.00		4011.8	
Base Total:				1899.0		3892.9		As-Built Total:		1957.0	
										4011.8	
FLOOR TYPES Area X BWPM = Points				Type	R-Value		Area X WPM = Points				
Slab	220.0(p)	8.9	1958.0	Slab-On-Grade Edge Insulation	0.0		220.0(p)	18.80		4136.0	
Raised	0.0	0.00	0.0								
Base Total:				1958.0		As-Built Total:		220.0		4136.0	
INFILTRATION Area X BWPM = Points								Area X WPM = Points			
1899.0 -0.59 -1120.4								1899.0 -0.59 -1120.4			

WINTER CALCULATIONS**Residential Whole Building Performance Method A - Details**

ADDRESS: 157 NW Pompano Court, Lake City, FL, 32055-

PERMIT #:

BASE				AS-BUILT						
Winter Base Points:		18938.7		Winter As-Built Points:			17885.4			
Total Winter Points	X	System Multiplier	= Heating Points	Total Component	X	Cap Ratio	X Duct Multiplier	X System Multiplier	X Credit Multiplier	= Heating Points
							(DM x DSM x AHU)			
18938.7		0.6274	11882.2	17885.4	1.000	(1.000 x 1.169 x 0.93)	0.501	1.000	9750.8	
18938.7		0.6274	11882.2	17885.4	1.00	1.087	0.501	1.000	9750.8	

Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: 157 NW Pompano Court, Lake City, FL, 32055-

PERMIT #:

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	606.1.ABC.1.1	Maximum: .3 cfm/sq.ft. window area; .5 cfm/sq.ft. door area.	
Exterior & Adjacent Walls	606.1.ABC.1.2.1	Caulk, gasket, weatherstrip or seal between: windows/doors & frames, surrounding wall; foundation & wall sole or sill plate; joints between exterior wall panels at corners; utility penetrations; between wall panels & top/bottom plates; between walls and floor. EXCEPTION: Frame walls where a continuous infiltration barrier is installed that extends from, and is sealed to, the foundation to the top plate.	
Floors	606.1.ABC.1.2.2	Penetrations/openings >1/8" sealed unless backed by truss or joint members. EXCEPTION: Frame floors where a continuous infiltration barrier is installed that is sealed to the perimeter, penetrations and seams.	
Ceilings	606.1.ABC.1.2.3	Between walls & ceilings; penetrations of ceiling plane of top floor; around shafts, chases, soffits, chimneys, cabinets sealed to continuous air barrier; gaps in gyp board & top plate; attic access. EXCEPTION: Frame ceilings where a continuous infiltration barrier is installed that is sealed at the perimeter, at penetrations and seams.	
Recessed Lighting Fixtures	606.1.ABC.1.2.4	Type IC rated with no penetrations, sealed; or Type IC or non-IC rated, installed inside a sealed box with 1/2" clearance & 3" from insulation; or Type IC rated with < 2.0 cfm from conditioned space, tested.	
Multi-story Houses	606.1.ABC.1.2.5	Air barrier on perimeter of floor cavity between floors.	
Additional Infiltration reqts	606.1.ABC.1.3	Exhaust fans vented to outdoors, dampers; combustion space heaters comply with NFPA, have combustion air.	

6A-22 OTHER PRESCRIPTIVE MEASURES (must be met or exceeded by all residences.)

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	612.1	Comply with efficiency requirements in Table 6-12. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required.	
Swimming Pools & Spas	612.1	Spas & heated pools must have covers (except solar heated). Non-commercial pools must have a pump timer. Gas spa & pool heaters must have a minimum thermal efficiency of 78%.	
Shower heads	612.1	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG.	
Air Distribution Systems	610.1	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated, and installed in accordance with the criteria of Section 610. Ducts in unconditioned attics: R-6 min. insulation.	
HVAC Controls	607.1	Separate readily accessible manual or automatic thermostat for each system.	
Insulation	604.1, 602.1	Ceilings-Min. R-19. Common walls-Frame R-11 or CBS R-3 both sides. Common ceiling & floors R-11.	

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 86.1

The higher the score, the more efficient the home.

John and Debbie Michele, 157 NW Pompano Court, Lake City, FL, 32055-

1. New construction or existing	New	12. Cooling systems	
2. Single family or multi-family	Single family	a. Central Unit	Cap: 36.0 kBtu/hr
3. Number of units, if multi-family	1		SEER: 10.00
4. Number of Bedrooms	3	b. N/A	
5. Is this a worst case?	Yes	c. N/A	
6. Conditioned floor area (ft ²)	1899 ft ²		
7. Glass area & type	Single Pane Double Pane	13. Heating systems	
a. Clear - single pane	0.0 ft ² 196.7 ft ²	a. Electric Heat Pump	Cap: 36.0 kBtu/hr
b. Clear - double pane	0.0 ft ² 0.0 ft ²		HSPF: 6.80
c. Tint/other SHGC - single pane	0.0 ft ² 0.0 ft ²	b. N/A	
d. Tint/other SHGC - double pane		c. N/A	
8. Floor types			
a. Slab-On-Grade Edge Insulation	R=0.0, 220.0(p) ft	14. Hot water systems	
b. N/A		a. LP Gas	Cap: 50.0 gallons
c. N/A			EF: 0.60
9. Wall types		b. N/A	
a. Frame, Wood, Exterior	R=19.0, 1554.0 ft ²	c. Conservation credits	
b. Frame, Wood, Exterior	R=19.0, 208.0 ft ²	(HR-Heat recovery, Solar	
c. Frame, Wood, Adjacent	R=13.0, 320.0 ft ²	DHP-Dedicated heat pump)	
d. N/A		15. HVAC credits	
e. N/A		(CF-Ceiling fan, CV-Cross ventilation,	
10. Ceiling types		HF-Whole house fan,	
a. Under Attic	R=30.0, 1957.0 ft ²	PT-Programmable Thermostat,	
b. N/A		MZ-C-Multizone cooling,	
c. N/A		MZ-H-Multizone heating)	
11. Ducts			
a. Sup: Con. Ret: Con. AH: Interior	Sup. R=6.0, 70.0 ft		
b. N/A			

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

Builder Signature: _____ Date: _____

Address of New Home: _____ City/FL Zip: _____

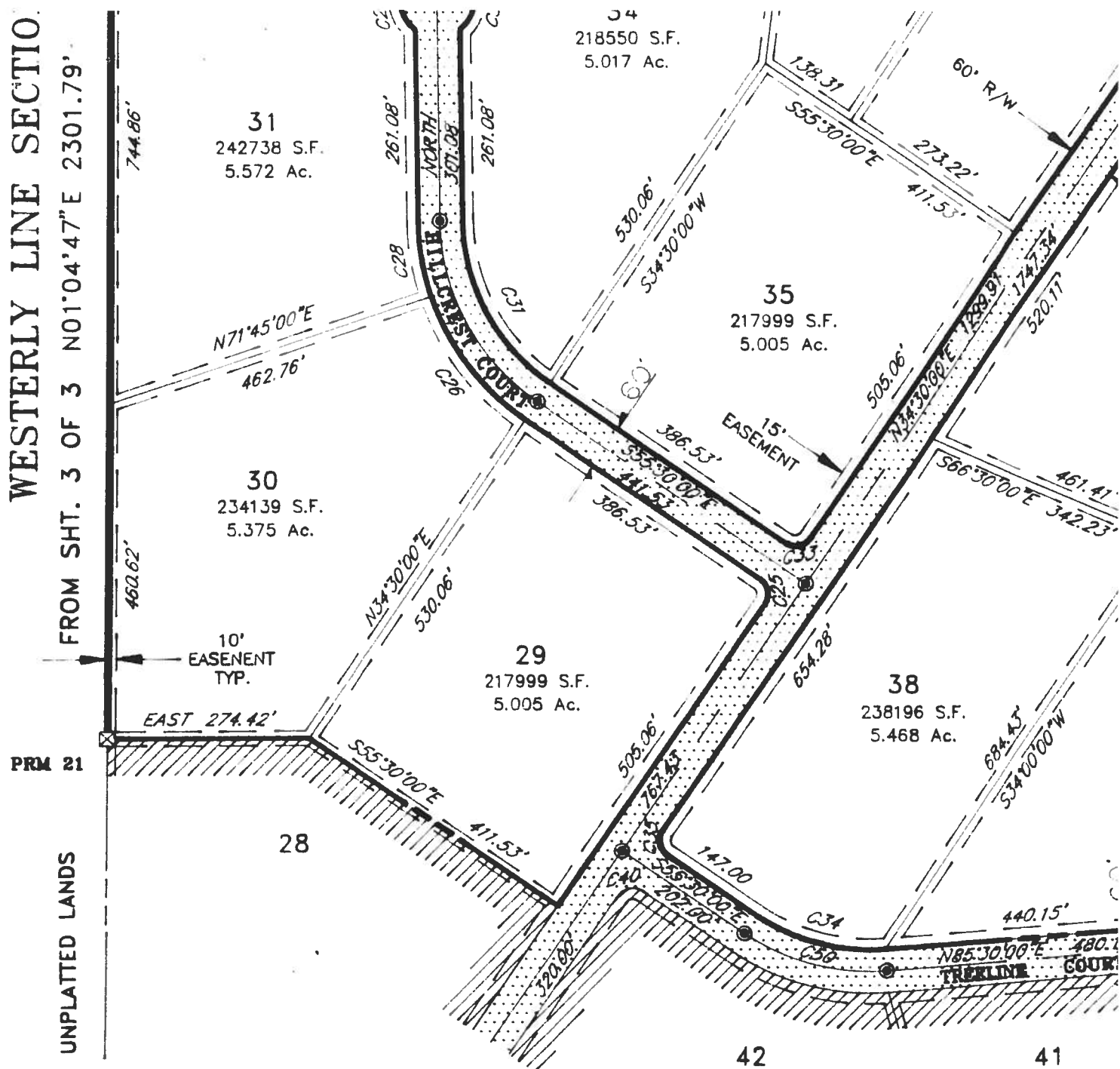


NOTE: The home's estimated energy performance score is only available through the FLA/RES computer program. This is **not a Building Energy Rating. If your score is 80 or greater (or 86 for a US EPA/DOE EnergyStarTM designation), your home may qualify for energy efficiency mortgage (EEM) incentives if you obtain a Florida Energy Gauge Rating. Contact the Energy Gauge Hotline at 321/638-1492 or see the Energy Gauge web site at www.fsec.ucf.edu for information and a list of certified Raters. For information about Florida's Energy Efficiency Code For Building Construction, contact the Department of Community Affairs at 850/487-1824.*

EnergyGauge® (Version: FLRCPB v3.30)

UNPLATTED LANDS

FROM SHT. 3 OF 3 N01°04'47"E 2301.79'



COLUMBIA COUNTY 9-1-1 ADDRESSING

263 NW Lake City Ave. * P. O. Box 2949 * Lake City, FL 32056-2949

PHONE: (386) 752-8787 * 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 ISSUED: 12-12-03

ENHANCED 9-1-1 ADDRESS:

157 NW Pompano CT (Lake City, FL 32055)

Addressed Location 911 Phone Number: N/A

OCCUPANT NAME: John + Debra Michel

OCCUPANT CURRENT MAILING ADDRESS: 8288 SW Oak Hammock Ct.
Stuart, FL 34997

PROPERTY APPRAISER MAP SHEET NUMBER: 42

PROPERTY APPRAISER PARCEL NUMBER: 09-35-16-02049-135

Other Contact Phone Number (If any): _____

Building Permit Number (If known): _____

Remarks: LOT 35 Rolling Oaks S/D.

Address Issued By: _____

[Signature]
Columbia County 9-1-1 Addressing Department

DISCLOSURE STATEMENT

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

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$25,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. You may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

TYPE OF CONSTRUCTION

☒ Single Family Dwelling
☐ Farm Outbuilding

☐ Two-Family Residence
☐ Other _____

NEW CONSTRUCTION OR IMPROVEMENT

☒ New Construction ☐ Addition, Alteration, Modification or other Improvement

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


Signature

2/2/04
Date

FOR BUILDING USE ONLY

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

Date 2-16-04 Building Official/Representative 



STATE OF FLORIDA
DEPARTMENT OF HEALTH

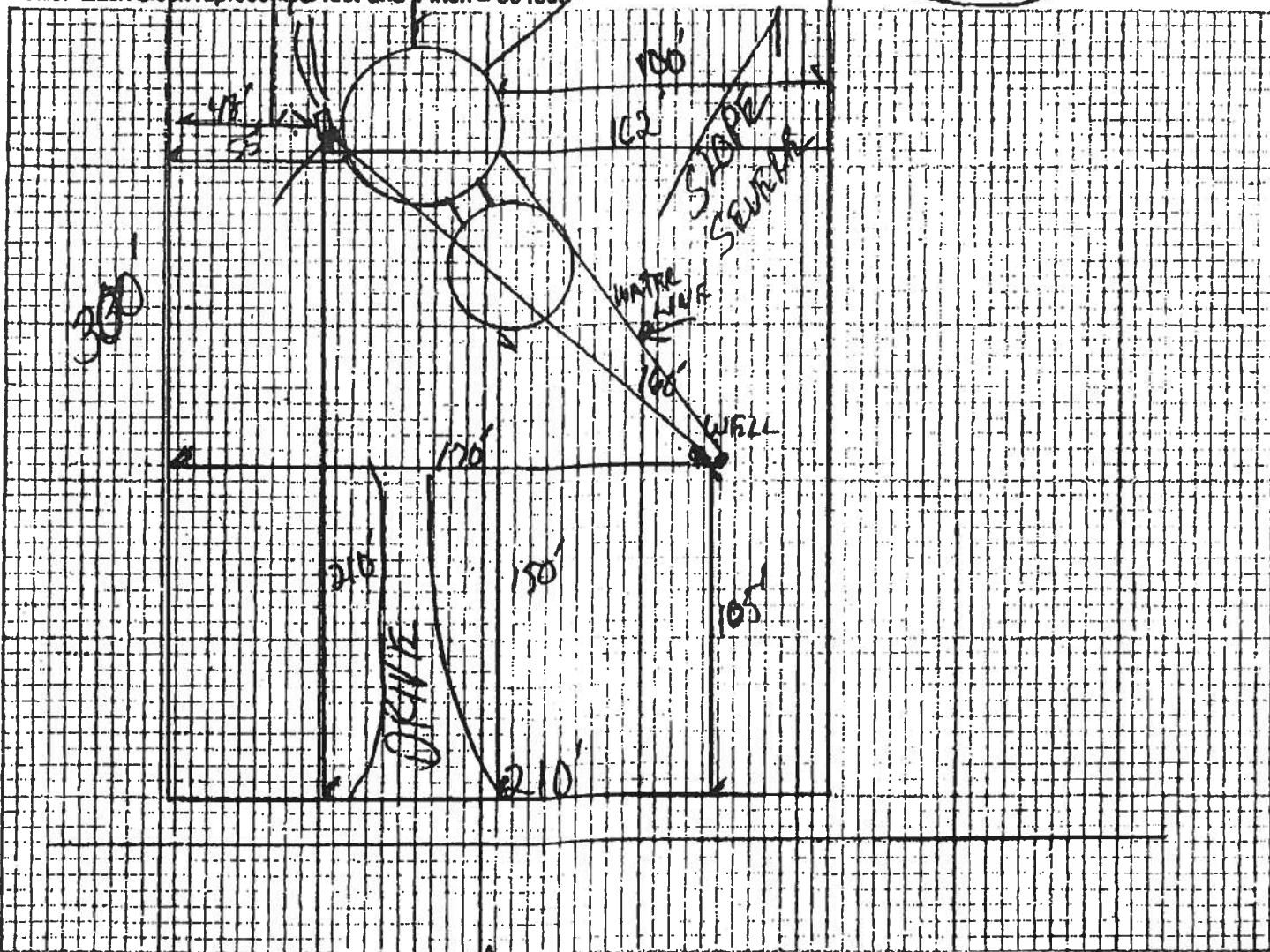
APPLICATION FOR SITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

04-0063N

PART II SITE PLAN

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



Notes: 1.44 of 5 ACRES

Site Plan submitted by:

Rocky D F-O

Signature

Plan Approved

✓

Not Approved

Title

Date 01/22/04

By J. H. KARRAS EST

Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Permit No. _____

Tax Parcel No. _____

COLUMBIA COUNTY NOTICE OF COMMENCEMENT

STATE OF FLORIDA

Inst: 2004003422 Date: 02/16/2004 Time: 15:21

TICK DC, P. DeWitt Cason, Columbia County B: 1007 P: 613

COUNTY OF COLUMBIA

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

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

09-35-16-02049-135 LOT 35 ROLLING OAKS S/D
0BB 678-607, 987-2105

2. General description of improvement:

NEW RESIDENCE

3. Owner Information:

A. Name and address:

John F. & Debra B. Michel

157 NW Pompano Ct. Lake City, FL 32055

B. Interest in property:

OWNERS

C. Name and address of fee simple titleholder (if other than owner):

4. Contractor: (name and address)

SAME AS ABOVE

5. Surety

A. Name and address:

B. Amount of bond:

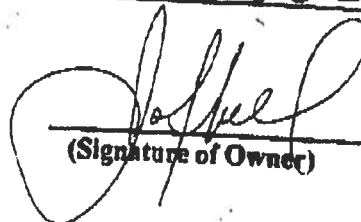
None

6. Lender: (name and address)

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 718.13(1)(a) 7., Florida Statutes: (name and address)

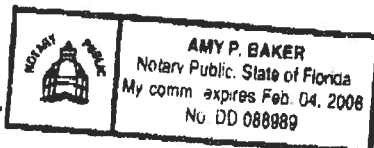
8. In addition to himself, owner designates NONE of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (a) 7., Florida Statutes.

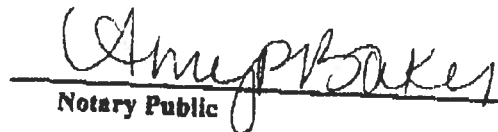
9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified) NONE


(Signature of Owner)

SWORN TO and subscribed before me this 2nd day of February 19 2004.

(NOTARIAL
SEAL)




Notary Public

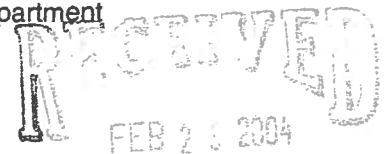
My Commission Expires: 2-4-08

Inst: 2004003422 Date: 02/16/2004 Time: 15:21
DC, P. DeWitt Cason, Columbia County B: 1007 P: 616

Rolling Oaks Owners Assoc., Inc.
P. O. Box 3637
Lake City, FL 32056

Keep this letter with our permit!
JK

Columbia County Building & Zoning Department
Att: John Kerce
P. O. Drawer 1529
Lake City, FL 32056



Board of County Commissioners
Columbia County

32056+1529



Rolling Oaks Owners, Assoc., Inc.

P. O. Box 3637
Lake City, FL 32056
USA

February 20, 2004

To Whom it may concern,

The Rolling Oaks Owners Assoc., Inc has reviewed the plans for the home of John and Debra Michel - at 157 NW Pompano Ct. Lake City, FL 32055. The plans meet the all the requirements under the by-laws of the association.

Sincerely,



Ernest Bennett, President



Shirley Yates, Secretary



Engineers

Contractors

Designers

3/2/2004

Columbia County Building Department

To whom it may concern,

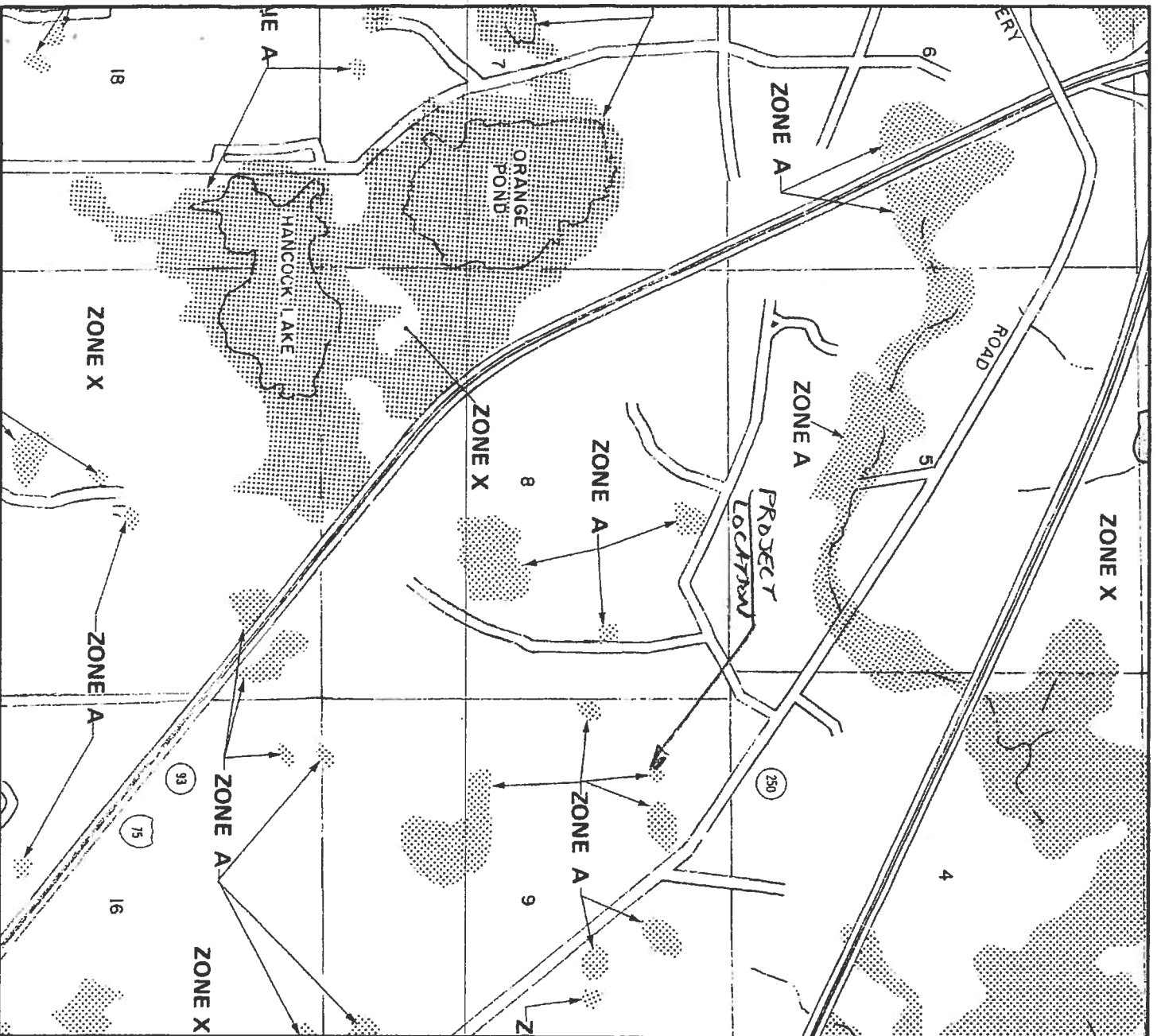
RE: John and Debbie Michele Residence

I have reviewed the conditions for the property located on Lot 35, Rolling Oaks Subdivision. Part of the property is located in a flood zone (Zone A). The required floor elevation shall be set 1' above the 100 year flood elevation. Set floor elevation based on benchmark to be at elevation 126.10'. The 100 year flood elevation is established at 125.10. If you have any questions, please call me at (386) 758-4209.

Sincerely,

A handwritten signature in black ink, appearing to read "William Freeman".

William Freeman, P.E.



APPROXIMATE SCALE IN FEET



NATIONAL FLOOD INSURANCE PROGRAM

FIRM
FLOOD INSURANCE RATE MAP

COLUMBIA
COUNTY,
FLORIDA
(UNINCORPORATED AREAS)

PANEL 125 OF 290

PANEL LOCATION



COMMUNITY-PANEL NUMBER
120070 0125 B
EFFECTIVE DATE:
JANUARY 6, 1988



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT Version 1.0. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. Further information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/nifms.

Columbia County Building Dept.
April 4, 2005

To Whom it may concern,

We would like to extend our
Building Permit here in Columbia
County.

Permit # 000021598

closed 3/05/2004

Please extend 90 days.

John F. Michel

157 N.W. Pompano Ct.

Lake City, FL 32055

completed
3/23/06

**FLORIDA
PEST
CONTROL**
A CHEMICAL CO.
Since 1949

www.flapest.com

**IMPORTANT
NOTICE TO
OWNER**

During the construction of your home Florida Pest Control & Chemical Co. provided treatment for the control and prevention of subterranean termites.

Continued protection requires that annual inspections be made. Please contact us at the number below to receive a copy of your Termite Protection Policy.

Address: *536 SE Bay A Ave*

Phone: *386-752-1703*

Renewal Date: *3-28-07*

10M - 5.04 ©

John Michel

2159

Notice of Treatment

Applicator Name Florida Pest Control
 Address 536 SE Bay
 City Lake City Phone 752-1703

Site Location

Lot # _____ Block # _____ Subdivision Pine Bluff Permit # _____
 Address 157 NW Pompano Pt

AREAS TREATED

Date	Time	Gal.	Int.	Area Treated	Retroat Date	Time	Int.
				Main Body			
				Patio/s #			
				Stoop/s #			
				Porch/s #			
				Brick Veneer			
				Extension Walls			
				A/C Pad			
				Walk/s #			
3-29-11	1115	110	GP	Exterior of Foundation			
				Driveway Curtain			
				Out Building			
				(Other)			
				(Other)			

Name of Chemical Applied Terminator 10% % used _____ %
 Remarks Exterior Foundation Treatment

Applicator - White

Permit File - Canary

Permit Holder - Pink

John Michel

Service Policy

10761

Structural Analysis Report



Owner's Name John Michel Date 3-28-06
 Structure Address 157 NW Pompano Ct City LC County CO
 Phone: Home () Work () Cell ()
 E-mail _____ Inspected by GARY

Type Foundation: ☒ Supported/Floating ☐ Monolithic ☐ Crawl Space ☐ Basement
Type Construction: ☐ Solid Pour Concrete ☐ Block ☐ Brick ☒ Wood Frame
☐ Styrofoam/Wood Panels ☐ Metal ☐ Other _____
Exterior Finish: ☐ Vinyl/Aluminum ☐ Stucco ☐ EIFS ☐ Brick
☐ Rock/Flagstone ☐ Log ☐ Wood ☐ Veneer
☒ Hardi-Plank ☐ Other _____
☐ Decorative Ext. Wall ☐ Chimney ☐ Planters ☐ Addition
☒ Wood Porch/Steps ☒ Wood Deck ☐ Other _____

Action Taken

☐ Removed stucco lip/slag
☐ Installed inspection panel(s)
☐ Attached wood deck discussed with customer. Addendum required: ☐ Yes ☐ No
☐ Explained the need for drilling but customer will not allow drilling to be done.
☒ Trenched and treated area(s) described: Exterior Perimeter (90-Day follow-up)
☐ Drilled and treated area(s) described: _____
☐ Other _____
☐ Discussed with customer treatment and/or alterations/repairs needed to continue with service policy.

Customer Responsibilities:

☐ Redirect/Redesign sprinklers so they do not wet the structure ☐ Redirect/Redesign gutters
☐ Remove wood debris/stored lumber from crawl area ☐ Install Gutters
☐ Add ventilation to crawl area ☐ Redirect A/C drip line
☐ Repair/Raise duct work ☐ Repair roof leak(s)
☐ Provide access to crawl area ☐ Excavate crawl area
☐ Cut off stucco/siding above soil level ☐ Repair wood rot
☐ Repair plumbing leak(s) in area(s) described: _____

☒ Remove wood in contact with soil in area(s) described: Form Boards at Front Door

☐ Correct excessive moisture in area(s) described: _____

☐ Other _____

☐ If this box is checked, the customer responsibilities indicated above must be completed within 90 days or the termite contract associated with this structure will be cancelled.

NOT 90-Day Follow-up
 Owner/Authorized Agent/Signature

GARY BASS
 Representative Signature

Owner/Authorized Agent (Print Name)

Date

GARY BASS
 Representative (Print Name)

3-28-06
 Date

WHITE FILE • YELLOW CUSTOMER

www.flapest.com

V. 3.0 - 5/00

Columbia County Building Department
Flood Development Permit

Development Permit
F 023- F02303027

DATE 03/05/2004 BUILDING PERMIT NUMBER 000021598
APPLICANT JOHN MICHEL PHONE 754-4696
ADDRESS 157 NW POMPAÑO COURT LAKE CITY FL 32055
OWNER JOHN & DEBRA MICHEL PHONE 754-4696
ADDRESS 157 NW POMPAÑO COURT LAKE CITY FL 32055
CONTRACTOR OWNER BUILDER PHONE _____
ADDRESS _____ FL _____
SUBDIVISION ROLLING OAKS Lot 35 Block _____ Unit _____ Phase _____
TYPE OF DEVELOPMENT SFD, UTILITY PARCEL ID NO. 09-3S-16-02049-135

FLOOD ZONE AE BY BK 1-6-88 FIRM COMMUNITY #. 120070 - PANEL #. 125 B
FIRM 100 YEAR ELEVATION 125.10 PLAN INCLUDED YES or NO
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 126.10
IN THE REGULATORY FLOODWAY YES or NO RIVER _____
SURVEYOR / ENGINEER NAME William Freeman LICENSE NUMBER _____

☒ ONE FOOT RISE CERTIFICATION INCLUDED

N/A ZERO RISE CERTIFICATION INCLUDED

N/A SRWMD PERMIT NUMBER _____
(INCLUDING THE ONE FOOT RISE CERTIFICATION)

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED _____

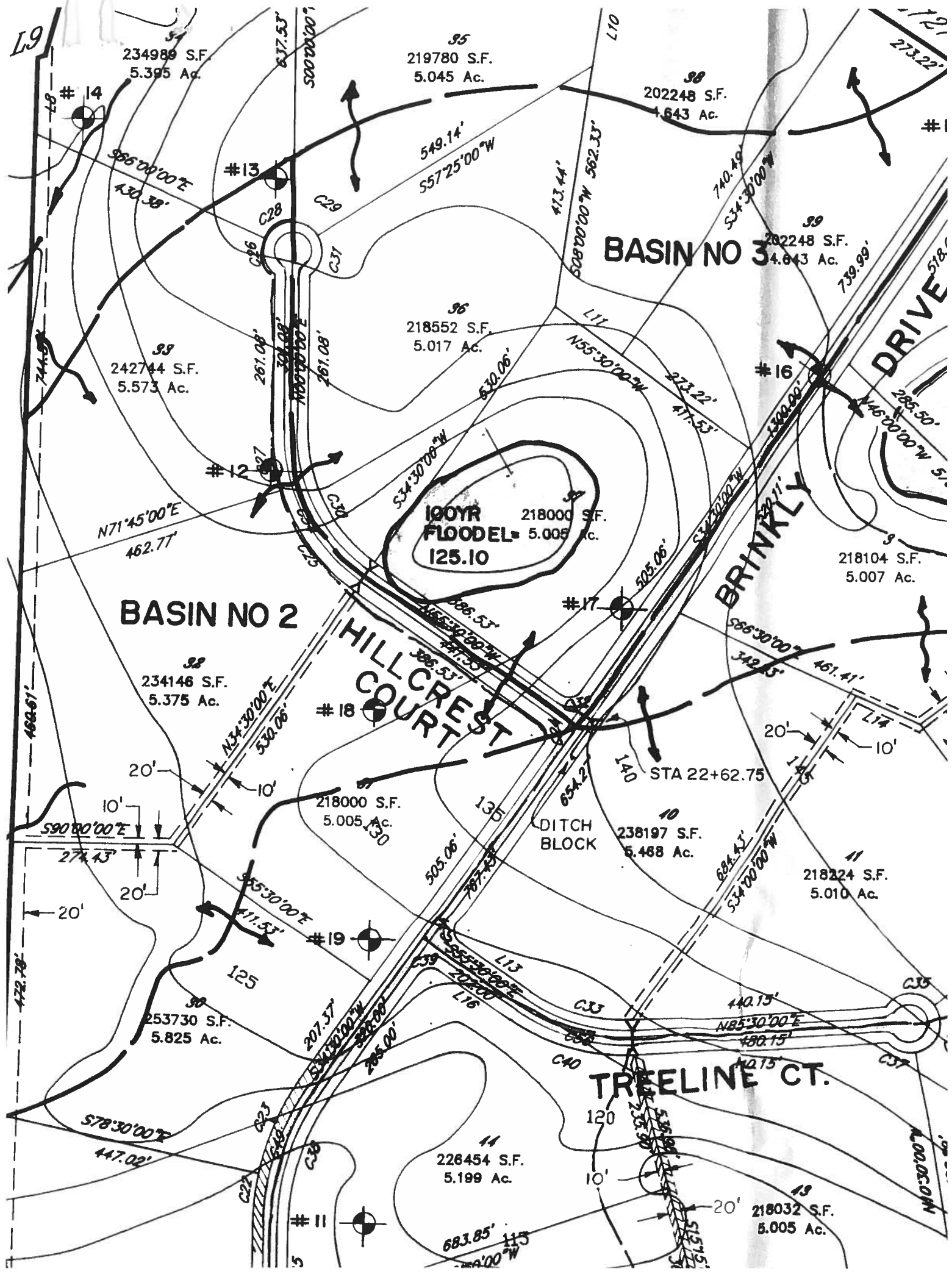
INSPECTED DATE 3-22-04 BY BK/LH

COMMENTS Based on footer, Elevation is ok at footer level

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



PERMIT EXPIRES ONE YEAR FROM THE DATE OF ISSUANCE



BASIN NO 2

BASIN NO 3

HILLCREST COURT

TREELINE CT.

BRINKLY DRIVE

100YR FLOODPLAIN
125.10

DITCH BLOCK

234980 S.F.
5.395 Ac.

219780 S.F.
5.045 Ac.

202248 S.F.
4.643 Ac.

202248 S.F.
4.643 Ac.

242744 S.F.
5.573 Ac.

218552 S.F.
5.017 Ac.

218000 S.F.
5.005 Ac.

218104 S.F.
5.007 Ac.

234146 S.F.
5.375 Ac.

218000 S.F.
5.005 Ac.

238197 S.F.
5.488 Ac.

218224 S.F.
5.010 Ac.

253730 S.F.
5.825 Ac.

226454 S.F.
5.199 Ac.

218032 S.F.
5.005 Ac.

995'00"00"E
430.38'

549.14'
S57'25"00"W

740.49'
S34'30"00"W

N71'45"00"E
462.77'

413.44'
S68'00"00"W

273.22'
411.53'

N55'30"00"W
530.06'

505.06'
S34'30"00"W

505.30'00"E
342.15'

684.45'
S34'00"00"W

440.15'
N85'30"00"E

400.00'00"W

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LOT # 35 ROLLING OAKS SUBDIVISION = 217,999 SF

AREA OF 100 YR FLOOD ELEVATION = 48,800 SF

AREA OF HOME = 2799 SF

100 YR FLOOD EL = 125.10

VOLUME OF WATER DISPLACED

$$2799 \text{ SF} (2' \text{ DEEP}) = 5598 \text{ CF}$$

TOTAL RISE OVER DEPRESSION AREA

$$5598 \text{ CF} / 48,800 \text{ SF} = 0.1147' = 1.38''$$

TOTAL RISE OF 1.38" IS LESS THAN 1'-0" RISE.

SET FINISHED FLOOR ELEVATION @ 126.10

1' ABOVE 100 YR FLOOD ELEVATION.

William H. Freeman
3/2/04

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

21598

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:
BUILDING OWNER'S NAME Debra and John Michel			Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 157 NW Pompano Court			Company NAIC Number
CITY Lake City	STATE FL	ZIP CODE 32055	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 35 Rolling Oaks			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###" or ###.####")		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 120070		B2. COUNTY NAME Columbia		B3. STATE FL	
B4. MAP AND PANEL NUMBER 0125	B5. SUFFIX B	B6. FIRM INDEX DATE 6 Jan 1988	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S) A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 125.1

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

☐ FIS Profile ☐ FIRM ☐ Community Determined ☒ Other (Describe): Engineered on plat

B11. Indicate the elevation datum used for the BFE in B9: ☒ NGVD 1929

☐ NAVD 1988 ☐ Other (Describe): _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No Designation Date _____

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. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. 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 C3.a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum _____ Conversion/Comments _____

Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

- ☐ a) Top of bottom floor (including basement or enclosure) 133.69 ft.(m)
- ☐ b) Top of next higher floor 133.69 ft.(m)
- ☐ c) Bottom of lowest horizontal structural member (V zones only) _____ ft.(m)
- ☐ d) Attached garage (top of slab) _____ ft.(m)
- ☐ e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) _____ ft.(m)
- ☐ f) Lowest adjacent (finished) grade (LAG) 130.5 ft.(m)
- ☐ g) Highest adjacent (finished) grade (HAG) 132.0 ft.(m)
- ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade _____
- ☐ i) Total area of all permanent openings (flood vents) in C3.h _____ sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

<p>License Number, Embossed Seal, Signature, and Date</p>

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

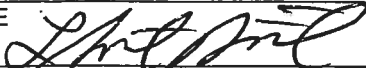
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.

I certify that the information in Sections A, B, and C 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.

CERTIFIER'S NAME L. Scott Britt

LICENSE NUMBER PLS #5757

TITLE Surveyor		COMPANY NAME Britt Surveying	
ADDRESS 830 W. Duval St.	CITY Lake City	STATE FL	ZIP CODE 32055
SIGNATURE 	DATE 03/17/04	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.			Policy Number
CITY	STATE	ZIP CODE	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

There is a footer only at this location at this time.

☐ Check here if attachments

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

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number ___ (Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is ___ ft.(m) ___ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ___ ft.(m) ___ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. The top of the platform of machinery and/or equipment servicing the building is ___ ft.(m) ___ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E5. For 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, C (Items C3.h and C3.i only), 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, C, 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.

G1. ☐ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
-------------------	------------------------	---

G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: ___ ft.(m) Datum: ___

G9. BFE or (in Zone AO) depth of flooding at the building site is: ___ ft.(m) Datum: ___

LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

COMMENTS

☐ Check here if attachments

BUILDING DIAGRAMS

The following eight diagrams illustrate various types of buildings. Compare the features of the building being certified with the features shown in the diagrams and select the diagram most applicable. Enter the diagram number in Item C2 and the elevations in Items C3a-C3g.

In A zones, the floor elevation is taken at the top finished surface of the floor indicated; in V zones, the floor elevation is taken at the bottom of the lowest horizontal structural member (see drawing in instructions for Section C).

DIAGRAM 1

All slab-on-grade single- and multiple-floor buildings (other than split-level) and high-rise buildings, either detached or row type (e.g., townhouses); with or without attached garage.

Distinguishing Feature – The bottom floor is at or above ground level (grade) on at least one side.

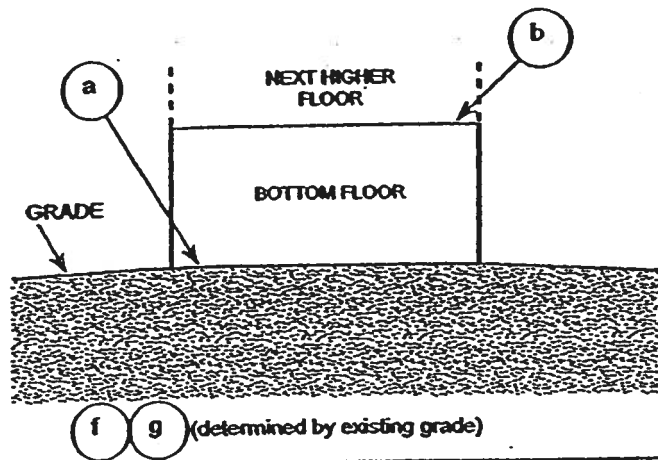


DIAGRAM 2

All single- and multiple-floor buildings with basement (other than split-level) and high-rise buildings with basement, either detached or row type (e.g., townhouses); with or without attached garage.

Distinguishing Feature – The bottom floor (basement or underground garage) is below ground level (grade) on all sides. Buildings constructed above crawl spaces that are below grade on all sides should also use this diagram.

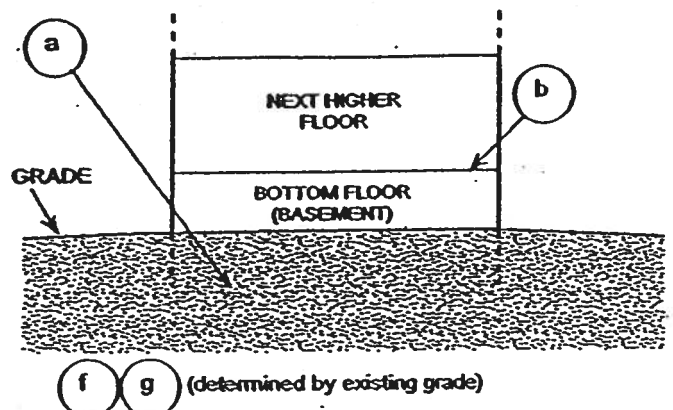


DIAGRAM 3

All split-level buildings that are slab-on-grade, either detached or row type (e.g., townhouses); with or without attached garage.

Distinguishing Feature – The bottom floor (excluding garage) is at or above ground level (grade) on at least one side.

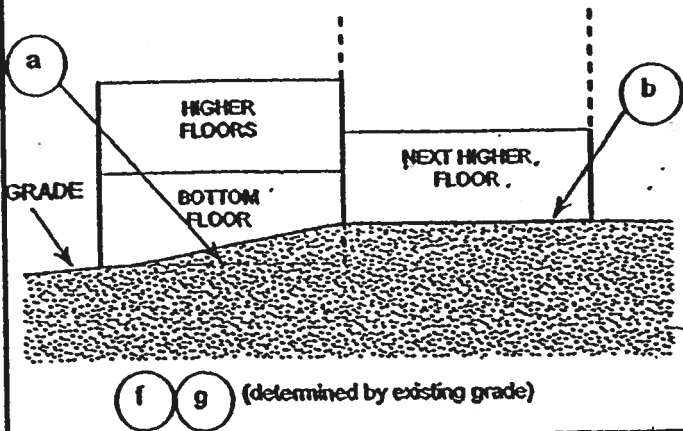
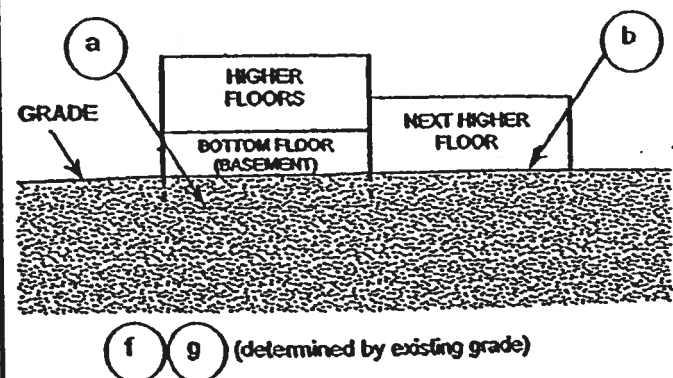


DIAGRAM 4

All split-level buildings (other than slab-on-grade), either detached or row type (e.g., townhouses); with or without attached garage.

Distinguishing Feature – The bottom floor (basement or underground garage) is below ground level (grade) on all sides. Buildings constructed above crawl spaces that are below grade on all sides should also use this diagram.



* A floor that is below ground level (grade) on all sides is considered a basement even if the floor is used for living purposes, or as an office, garage, workshop, etc.

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

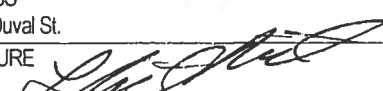
Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:
BUILDING OWNER'S NAME Debra and John Michel			Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 157 NW Pompano Court			Company NAIC Number
CITY Lake City	STATE FL	ZIP CODE 32055	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 35 Rolling Oaks			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.###" or ###.####")		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 120070		B2. COUNTY NAME Columbia		B3. STATE FL	
B4. MAP AND PANEL NUMBER 0125	B5. SUFFIX B	B6. FIRM INDEX DATE 6 Jan 1988	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S) A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 125.1
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input checked="" type="checkbox"/> Other (Describe): Engineered on plat					
B11. Indicate the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe): _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.	
C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)	
C3. 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Datum _____ Conversion/Comments _____ Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
o a) Top of bottom floor (including basement or enclosure)	134. 28 ft.(m)
o b) Top of next higher floor	134. 95 ft.(m)
o c) Bottom of lowest horizontal structural member (V zones only)	_____ ft.(m)
o d) Attached garage (top of slab)	133. 11 ft.(m)
o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	_____ ft.(m)
o f) Lowest adjacent (finished) grade (LAG)	130. 5 ft.(m)
o g) Highest adjacent (finished) grade (HAG)	132. 0 ft.(m)
o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade _____	
o i) Total area of all permanent openings (flood vents) in C3.h _____ sq. in. (sq. cm)	

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 in Sections A, B, and C 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.	
CERTIFIER'S NAME L. Scott Britt	LICENSE NUMBER PLS #5757

TITLESurveyor		COMPANY NAME Britt Surveying	
ADDRESS 830 W. Duval St.	CITY Lake City	STATE FL	ZIP CODE 32055
SIGNATURE 	DATE 03/29/06	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.

Policy Number

157 NW Pompano Court

CITY
Lake CitySTATE
FLZIP CODE
32025

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-17234

☐ Check here if attachments**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number __ (Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E5. For 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, C (Items C3.h and C3.i only), 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, C, 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.

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

G4. PERMIT NUMBER

G5. DATE PERMIT ISSUED

G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

_____. ____ ft.(m)

Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is:

_____. ____ ft.(m)

Datum: _____

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

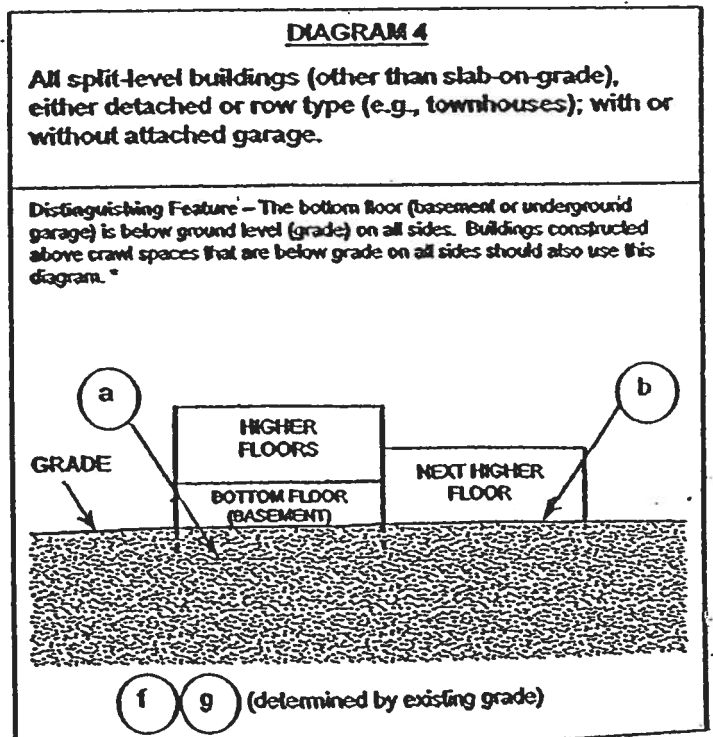
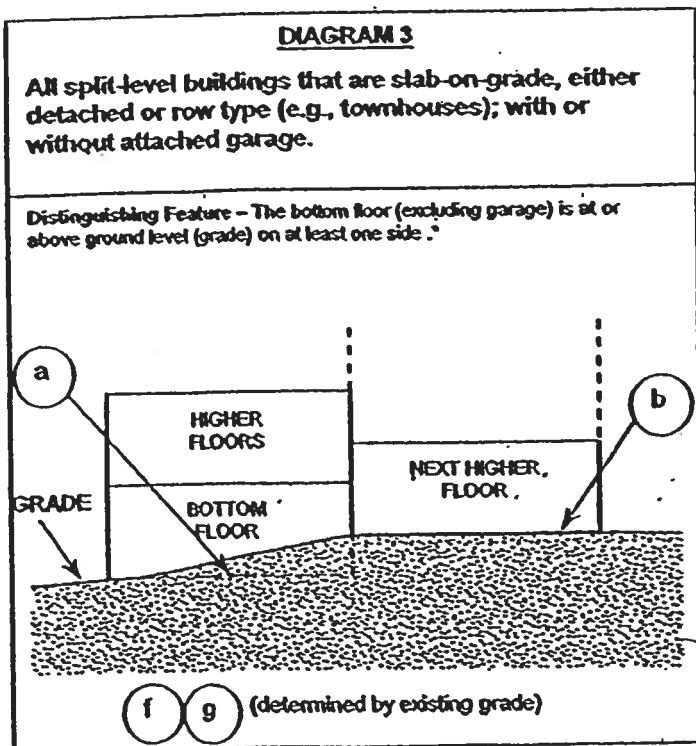
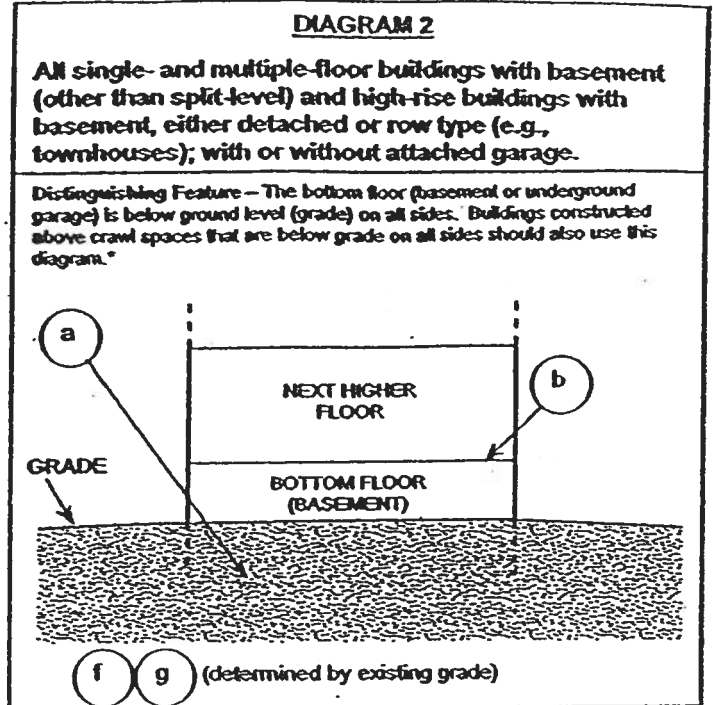
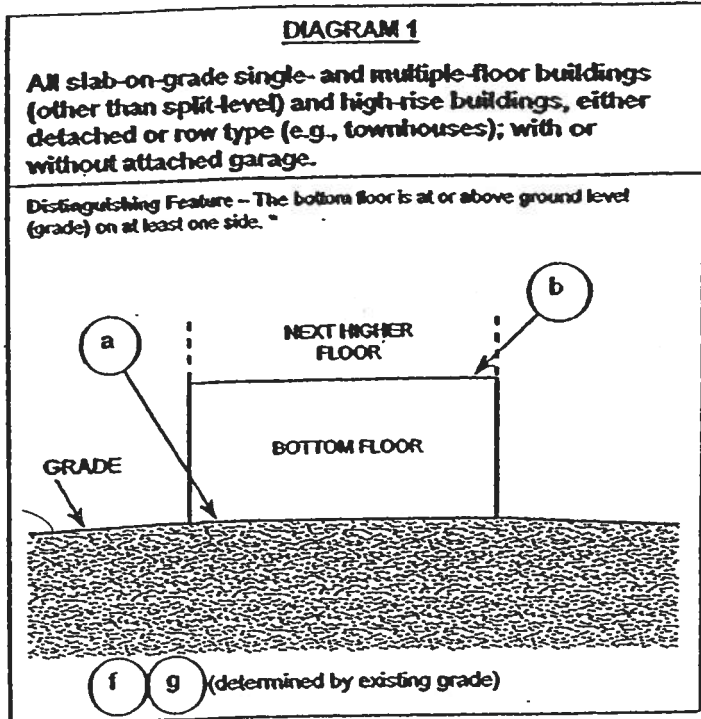
COMMENTS

☐ Check here if attachments

BUILDING DIAGRAMS

The following eight diagrams illustrate various types of buildings. Compare the features of the building being certified with the features shown in the diagrams and select the diagram most applicable. Enter the diagram number in Item C2 and the elevations in Items C3a-C3g.

In A zones, the floor elevation is taken at the top finished surface of the floor indicated; in V zones, the floor elevation is taken at the bottom of the lowest horizontal structural member (see drawing in instructions for Section C).



* A floor that is below ground level (grade) on all sides is considered a basement even if the floor is used for living purposes, or as an office, garage, workshop, etc.

DIAGRAM 5

All buildings elevated on piers, posts, piles, columns, or parallel shear walls. No obstructions below the elevated floor.

Distinguishing Feature – For all zones, the area below the elevated floor is open, with no obstruction to flow of flood waters (open lattice work and/or readily removable insect screening is permissible).

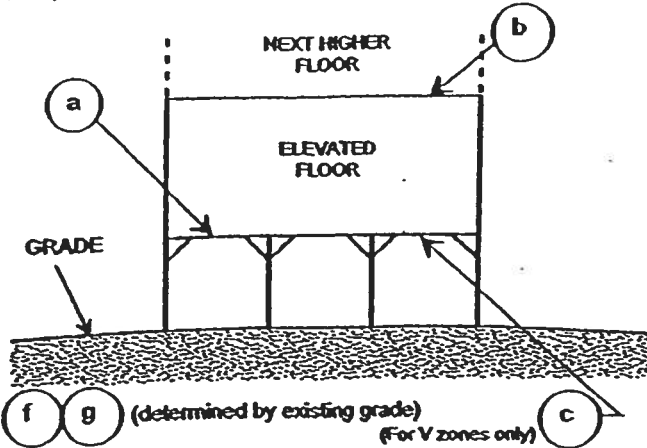


DIAGRAM 6

All buildings elevated on piers, posts, piles, columns, or parallel shear walls with full or partial enclosure below the elevated floor.

Distinguishing Feature – For all zones, the area below the elevated floor is enclosed, either partially or fully. In A Zones, the partially or fully enclosed area below the elevated floor is with or without openings** present in the walls of the enclosure. Indicate information about openings in Section C, Building Elevation Information (Survey Required).

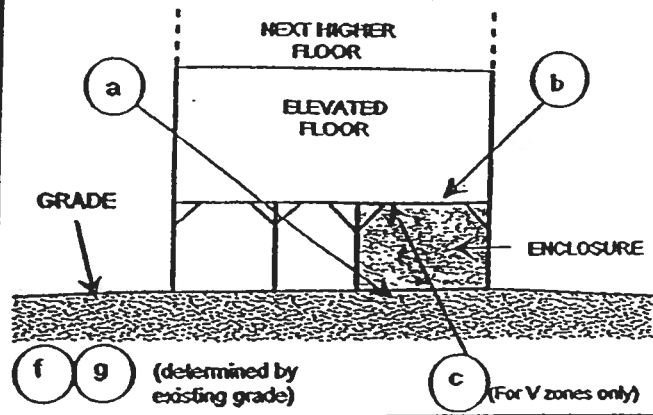


DIAGRAM 7

All buildings elevated on full-story foundation walls with a partially or fully enclosed area below the elevated floor. This includes walkout levels, where at least one side is at or above grade. The principal use of this building is located in the elevated floors of the building.

Distinguishing Feature – For all zones, the area below the elevated floor is enclosed, either partially or fully. In A Zones, the partially or fully enclosed area below the elevated floor is with or without openings** present in the walls of the enclosure. Indicate information about openings in Section C, Building Elevation Information (Survey Required).

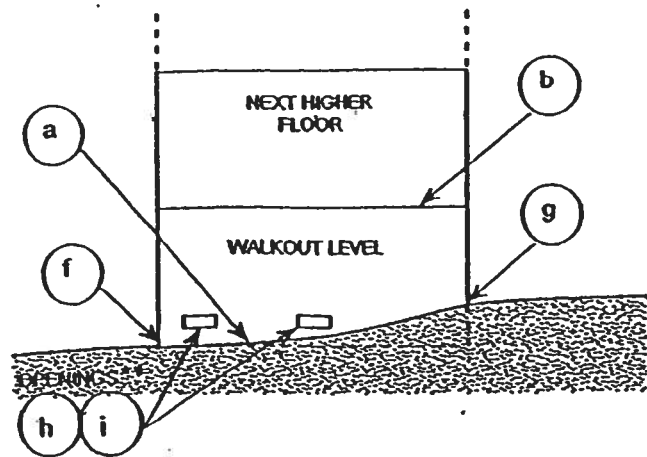
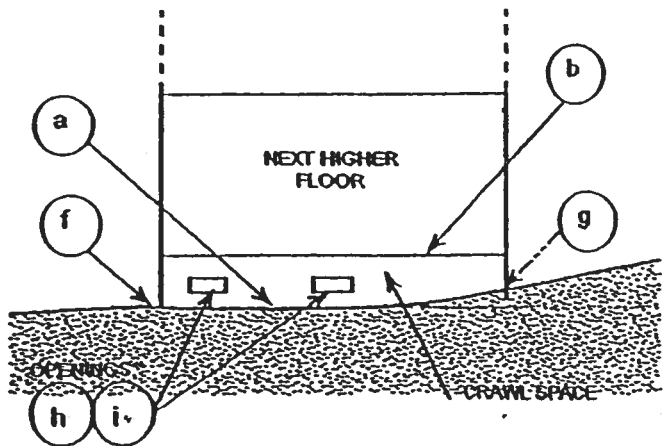


DIAGRAM 8

All buildings elevated on a crawl space with the floor of the crawl space at or above grade on at least one side.

Distinguishing Feature – For all zones, the area below the first floor is enclosed by solid or partial perimeter walls. In all A zones, the crawl space is with or without openings** present in the walls of the crawl space. Indicate information about the openings in Section C, Building Elevation Information (Survey Required).



An "opening" (flood vent) is defined as a permanent opening in a wall that allows for the free passage of water automatically in both directions without human intervention. Under the NFIP, a minimum of two openings is required for enclosures or crawl spaces with a total net area of not less than one square inch for every square foot of area enclosed. Each opening must be on different sides of the enclosed area. If a building has more than one enclosed area, each area must have openings on exterior walls to allow floodwater to directly enter. The bottom of the openings must be no higher than one foot above the grade underneath the flood vents. Alternatively, you may submit a certification by a registered professional engineer or architect that the design will allow for the automatic equalization of hydrostatic flood forces on exterior walls. A window, a door, or a garage door is not considered an opening.