

DATE 04/25/2005

# Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000023067

APPLICANT DAVID SIMQUE PHONE 755-7781

ADDRESS P.O. BOX 2962 LAKE CITY FL 32056

OWNER SRJ, LLC PHONE 755-5828

ADDRESS 2915 W US HIGHWAY 90 LAKE CITY FL 32055

CONTRACTOR SIMQUE CONSTRUCTION PHONE 755-7787

LOCATION OF PROPERTY 90W, IN BETWEEN APPLEBES AND WAFFLEHOUSE,  
ELIONOS

TYPE DEVELOPMENT COMMERCIAL ESTIMATED COST OF CONSTRUCTION 70000.00

HEATED FLOOR AREA 700.00 TOTAL AREA                      HEIGHT .00 STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 4/12 FLOOR SLAB

LAND USE & ZONING CI MAX. HEIGHT 16

Minimum Set Back Requirments: STREET-FRONT 20.00 REAR 15.00 SIDE 5.00

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

PARCEL ID 35-3S-16-02585-006 SUBDIVISION VILLAGE SQUARE

LOT            BLOCK            PHASE            UNIT            TOTAL ACRES                     

CBC056158

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

FDOT X05-0094 BK                      N                     

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

COMMENTS: ONE FOOT ABOVE THE ROAD, noc on file

Check # or Cash 1210

## 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                      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 \$ 350.00 CERTIFICATION FEE \$ .00 SURCHARGE FEE \$ .00

MISC. FEES \$ .00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$                      WASTE FEE \$                     

FLOOD ZONE DEVELOPMENT FEE \$                      CULVERT FEE \$                      TOTAL FEE 400.00

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. 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 INCONVIENCE, 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

Revised 9-23-04

CK# 1210

For Office Use Only Application # 0504-07 Date Received 4/4/05 By JW Permit # 23067  
Application Approved by - Zoning Official BZK Date 22.04.05 Plans Examiner BK JTH Date 4-21-05  
Flood Zone X Development Permit N/A Zoning CI Land Use Plan Map Category Comm.  
Comments SDP 04-6

Applicants Name David Simanz Phone 386-755-7787  
Address P.O. Box 2962 Lake City, FL 32056  
Owners Name SRS, LLC Phone 386-755-5828  
911 Address 2915 W US Hwy 90 Lake City, FL 32055  
Contractors Name Simanz Construction Phone 386-755-7787  
Address 1890 S.W. MIDTOWN PL. 32025  
Fee Simple Owner Name & Address Westfield Group, LLP P.O. Box 3566, Lake City, FL 32056  
Bonding Co. Name & Address \_\_\_\_\_  
Architect/Engineer Name & Address BZK P.O. Box 3717 Lake City, FL 32056  
Mortgage Lenders Name & Address Mercantile Bank  
Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Energy  
Property ID Number 35-35-16-02585-006 Estimated Cost of Construction 70,000  
Subdivision Name Village Square Lot \_\_\_\_\_ Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase \_\_\_\_\_  
Driving Directions HWY 90 EAST OF I 75 BETWEEN WAREHOUSE and APPLEBEE'S  
Type of Construction Comm ELIDNO'S Number of Existing Dwellings on Property \_\_\_\_\_  
Total Acreage \_\_\_\_\_ Lot Size \_\_\_\_\_ Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive  
Actual Distance of Structure from Property Lines - Front 54' Side 30' Side 30' Rear 100'  
Total Building Height 16' Number of Stories 1 Heated Floor Area 700 Roof Pitch 1/4/12

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.

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

**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.

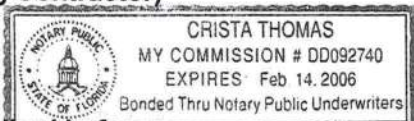
Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA  
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me

this 31 day of March 2005.

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



Contractor Signature

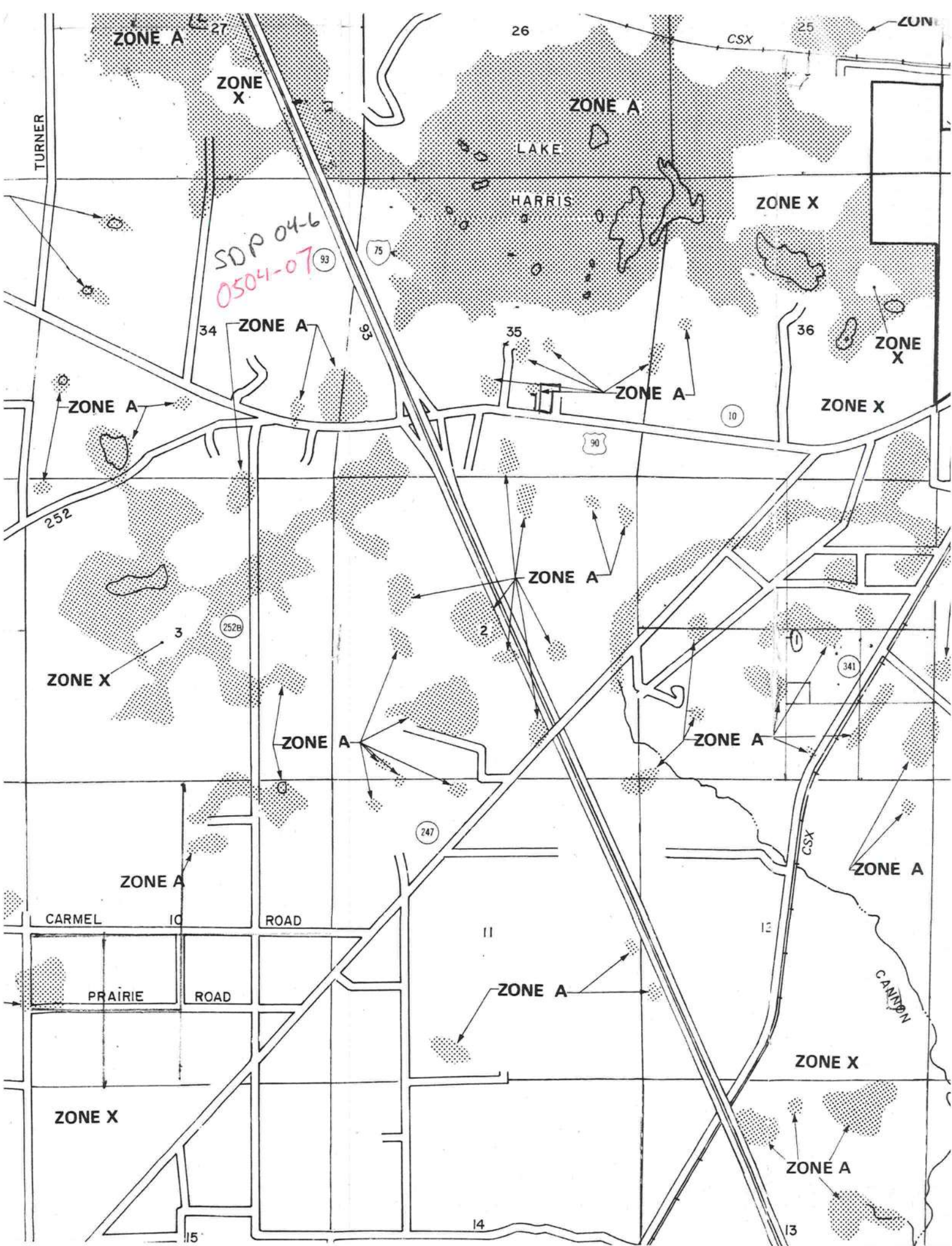
Contractors License Number CB056158

Competency Card Number \_\_\_\_\_

NOTARY STAMP/SEAL

Crista Thomas

Notary Signature



# COLUMBIA COUNTY FLORIDA DEPARTMENT OF BUILDING AND ZONING INSPECTION

## 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 35-3S-16-02585-006

Building permit No. 000023067

Use Classification COMMERCIAL

Fire: 11.90

Permit Holder SIMQUE CONSTRUCTION

Waste:

Owner of Building SRJ, LLC

Total: 11.90

Location: 2915 W US HIGHWAY 90(ELIONOS)



Date: 07/11/2005

*Tany Bieker*

Building Inspector

POST IN A CONSPICUOUS PLACE  
(Business Places Only)

758-2160

23067



Alphonso Wilson  
Fire Chief

## LAKE CITY / COLUMBIA COUNTY FIRE - RESCUE

225 NW Main Blvd., Suite 101, Lake City, FL 32055  
Phone: 386-752-3312 Fax: 386-758-5424  
e-mail: lcfd@se.rr.com  
alwilson@se.rr.com (Fire Chief)

### Inspection Division

#### Firesafety Inspectors

Carlton A. Tunsil  
Assistant Fire Chief

Frank E. Armijo  
Captain

Nathiel L. Williams, Sr.  
Driver/Engineer

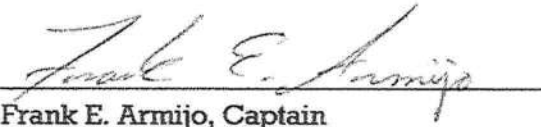
TO: David Simque

FROM: Frank E. Armijo, Captain  
State Fire Inspector License #112877

DATE: July 6, 2005

SUBJECT: Fire Safety Inspection

A fire safety inspection was performed today at Ellianos, located at 2915 U.S. 90 West, Lake City, FL. This business meets all requirements of Chapter 38 of Life Safety Code 101, 2005 Edition. No violations were noted. I recommend approval.

  
Frank E. Armijo, Captain  
State Fire Inspector License #112877

# ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs

EnergyGauge FlaCom v1.22 FORM 400A-2001

Whole Building Performance Method for Commercial Buildings

Jurisdiction: Lake City, Columbia County, Fl.

Short Desc: 408252

Project: Elianos Grande

Owner: Ellianos Coffee Company

Address:

City: Lake City, Columbia County

State: FL

Zip: 0

PermitNo: 0 23067

Storeys: 1

Type: Restaurant

GrossArea: 718

Class: New Finished building

Net Area: 718

Max Tonnage: 5 (if different, write in)

## Compliance Summary

Component	Design	Criteria	Result
Gross Energy Use	94.00	100.00	PASSES
Other Envelope Requirements - A			PASSES
LIGHTING CONTROLS			PASSES
EXTERNAL LIGHTING			PASSES
HVAC SYSTEM			PASSES
PLANT			PASSES
WATER HEATING SYSTEMS			PASSES
PIPING SYSTEMS			PASSES
Met all required compliance from Check List?			Yes/No/NA

**IMPORTANT NOTE:** An input report Print-Out from EnergyGauge FlaCom of this design building must be submitted along with this Compliance Report.

**COMPLIANCE CERTIFICATION:**

<p>I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Efficiency Code.</p> <p>PREPARED BY: <u>TRK</u></p> <p>DATE: <u>4/21/05</u></p> <p>I hereby certify that this building is in compliance with the Florida Energy Efficiency Code.</p> <p>OWNER AGENT: _____</p> <p>DATE: _____</p>	<p>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 in accordance with Section 553.908, F.S.</p> <p>BUILDING OFFICIAL: _____</p> <p>DATE: _____</p>
<p>If required by Florida law, I hereby certify (*) that the system design is in compliance with the Florida Energy Code.</p> <p><b>ARCHITECT:</b> _____</p> <p><b>ELECTRICAL SYSTEM DESIGNER:</b> _____</p> <p><b>LIGHTING SYSTEM DESIGNER:</b> _____</p> <p><b>MECHANICAL SYSTEM DESIGNER:</b> _____</p> <p><b>PLUMBING SYSTEM DESIGNER:</b> _____</p>	
<p style="text-align: right;"><b>REGISTRATION No.</b></p>	

(\*) Signature is required where Florida Law requires design to be performed by registered design professionals. Typed names and registration numbers may be used where all relevant information is contained on signed/sealed plans.

Project: 408252  
Title: Elianos Grande  
Type: Restaurant  
Location: Lake City, Columbia County, Fl.

### Whole Building Compliance

	Design	Reference
<b>Total</b>	<b>94.00</b>	<b>100.00</b>
<b>ELECTRICITY</b>	<b>94.00</b>	<b>100.00</b>
<b>AREA LIGHTS</b>	<b>14.26</b>	<b>19.14</b>
<b>MISC EQUIPMT</b>	<b>0.75</b>	<b>0.75</b>
<b>PUMPS &amp; MISC</b>		
<b>SPACE COOL</b>	<b>25.70</b>	<b>26.74</b>
<b>SPACE HEAT</b>	<b>8.44</b>	<b>8.54</b>
<b>VENT FANS</b>	<b>44.84</b>	<b>44.84</b>

Credits & Penalties (if any): Modified Points: = 94

PASSES

Project: 408252  
 Title: Elianos Grande  
 Type: Restaurant  
 Location: Lake City, Columbia County

### Other Envelope Requirements

Item	Zone	Description	Design	Limit	Meet Req.
Roof	Ellianos	Exterior Roof - Max Uo Limit	0.05	0.09	Yes

Meets Other Envelope Requirements

Project: 408252  
 Title: Elianos Grande  
 Type: Restaurant  
 Location: Lake City, Columbia County  
 (111300)

### External Lighting Compliance

Description	Category	Allowance (W/Unit)	Area or Length or No. of Units (sq.ft or ft)	ELPA (W)	CLP (W)
Ext Light 1	Entrance (without Canopy)	30.00	3.0	90	60
Ext Light 2	Building Exterior Surfaces/facades	0.25	390.0	98	100
Ext Light 3	Building Exterior Surfaces/facades	0.25	390.0	98	100

Design: 260 (W)

Allowance: 285 (W)

PASSES

Project: 408252  
 Title: Elianos Grande  
 Type: Restaurant  
 Location: Lake City, Columbia County

### Lighting Controls Compliance

Acronym	Ashrae ID	Description	Area (sq.ft)	No. of Tasks	Design CP	Min CP	Compli- ance
Store	8	Food Service - Bar/Lounge	454	1	2	2	PASSES
Bath	13	Toilet and Washroom	58	1	1	1	PASSES

PASSES

Project: 408252  
Title: Elianos Grande  
Type: Restaurant  
Location: Lake City, Columbia County

## System Report Compliance

 $\text{PrO}_2\text{Sy}_2$ 

### System 2

### Constant Volume Packaged System

No. of Units  
1

Component	Category	Capacity	Design Eff	Eff Criteria	Design IPLV	IPLV Criteria	Compliance
Cooling System	Air Cooled < 65000 Btu/h Cooling Capacity		9.70	9.70	8.30		PASSES
Heating System	Air Cooled HP < 65000 Btu/h Cooling Capacity		3.00	3.00			PASSES
Air Handling System -Supply	Air Handler (Supply) - Constant Volume		0.80	0.80			PASSES

## PASSES

## Plant Compliance

Description	Installed No	Size	Design Eff	Min Eff	Design IPLV	Min IPLV	Category	Compliance
-------------	-----------------	------	---------------	------------	----------------	-------------	----------	------------

None

Project: 408252

Title: Elianos Grande

Type: Restaurant

Location: Lake City, Columbia County  
(111300)

## Water Heater Compliance

Description	Type	Category	Design Eff	Min Eff	Design Loss	Max Loss	Compliance
Water Heater 1	Storage Water Heater - Electric	<=120 [gal] & <= 12 [kW]	0.90	0.89			PASSES

## PASSES

Project: 408252  
 Title: Elianos Grande  
 Type: Restaurant  
 Location: Lake City, Columbia County

### Piping System Compliance

Category	Pipe Dia [inches]	Is Runout?	Operating Temp [F]	Ins Cond [Btu-in/hr .SF.F]	Ins Thick [in]	Req Ins Thick [in]	Compliance
Domestic and Service Hot Water Systems	0.75	True	105.00	0.28	0.64	0.63	PASSES

PASSES

Project: 408252  
 Title: Elianos Grande  
 Type: Restaurant  
 Location: Lake City, Columbia County

### Other Required Compliance

Category	Section	Requirement (write N/A in box if not applicable)	Check
Infiltration	406.1	Infiltration Criteria have been met	<input type="checkbox"/>
System	407.1	HVAC Load sizing has been performed	<input type="checkbox"/>
Ventilation	409.1	Ventilation criteria have been met	<input type="checkbox"/>
ADS	410.1	Duct sizing and Design have been performed	<input type="checkbox"/>
T & B	410.1	Testing and Balancing will be performed	<input type="checkbox"/>
Electrical	413.1	Metering criteria have been met	<input type="checkbox"/>
Motors	414.1	Motor efficiency criteria have been met	<input type="checkbox"/>
Lighting	415.1	Lighting criteria have been met	<input type="checkbox"/>
O & M	102.1	Operation/maintenance manual will be provided to owner	<input type="checkbox"/>
Roof/Ceil	404.1	R-19 for Roof Deck with supply plenums beneath it	<input type="checkbox"/>
Report	101	Input Report Print-Out from EnergyGauge FlaCom attached?	<input type="checkbox"/>

## COLUMBIA COUNTY BUILDING DEPARTMENT

### COMMERCIAL MINIMUM PLAN REQUIREMENTS AND CHECKLIST FOR FLORIDA BUILDING CODE 2001 WITH AMENDMENTS

ALL REQUIREMENTS LISTED ARE SUBJECT TO CHANGE  
EFFECTIVE MARCH 1, 2002

ALL BUILDING PLANS MUST INCLUDE THE FOLLOWING ITEMS AND INDICATE COMPLIANCE WITH CHAPTER 1606 OF THE FLORIDA BUILDING CODE 2001 WITH AMENDMENTS BY PROVIDING CALCULATIONS AND DETAILS THAT HAVE THE SIGNATURE AND SEAL OF A CERTIFIED ARCHITECT OR ENGINEER REGISTERED IN THE STATE OF FLORIDA. THE FOLLOWING BASIC WIND SPEED AS PER SECTION 1606 SHALL BE USED.

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

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

#### APPLICANT - PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL

**GENERAL REQUIREMENTS:** Two (2) complete sets of plans containing a floor plan, site plan, foundation plan, floor/roof framing plan or truss layout, wall sections and all exterior elevations with the following criteria and documents:

#### Applicant

#### Plans Examiner

- |                                     |                                     |   |
|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | All drawings must be clear, concise and drawn to scale ("Optional" details that are not used shall be marked void or crossed off). Square footage of different areas shall be shown on plans.   |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Designers name and signature on document (FBC 104.2.1) If licensed architect or engineer, official seal shall be <u>affixed</u> . <i>WILLIAM MYERS</i><br><i>BAILEY BISHOP &amp; LANE</i>   |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <u>Two (2) Copies of Approved Site Plan</u>   |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <u>Minimum Type Construction (FBC Table 500)</u>  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <u>Wind Load Engineering Summary, calculations and any details required:</u><br>a) Plans or specifications must state compliance with FBC Section 1606 <i>see A-1</i><br>b) The following information must be shown as per section 1606.1.7 FBC<br>/1. Basic wind speed (MPH) <i>120</i><br>/2. Wind importance factor (I) and building category ) <i>II</i><br>3. Wind exposure - if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated<br>/4. The applicable internal pressure coefficient<br>/5. Components and Cladding. The design wind pressure in terms of psf (kN/m <sup>2</sup> ), to be used for the design of exterior component and cladding materials not specifically designed by the registered design professional |
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <u>Fire Resistant Construction Requirements shall include:</u><br>a) Fire resistant separations (listed system)<br>b) Fire resistant protection for type of construction <i>TYPE VI UNPROTECTED, UNSPRINKLER</i><br>c) Protection of openings and penetrations of rated walls (listed systems) <i>see note A-3</i><br>d) Fire blocking and draft-stopping <i>A-3</i><br>e) Calculated fire resistance   |
| <input type="checkbox"/>            | <input type="checkbox"/>            |   |
| <input type="checkbox"/>            | <input type="checkbox"/>            |   |
| <input type="checkbox"/>            | <input type="checkbox"/>            |   |
| <input type="checkbox"/>            | <input type="checkbox"/>            |   |
| <input type="checkbox"/>            | <input type="checkbox"/>            |   |

**Fire Suppression Systems shall include: (To be reviewed by Fire Department)**

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | a) Fire sprinklers  |
| <input type="checkbox"/> | <input type="checkbox"/> | b) Fire alarm system (early warning) with name of licensed installer. If not shown on plans or not known at time of permitting, a separate permit shall be required by the licensed installer |
| <input type="checkbox"/> | <input type="checkbox"/> | c) Smoke evacuation system schematic  |
| <input type="checkbox"/> | <input type="checkbox"/> | d) Stand-pipes<br>Pre-engineered system<br>Riser diagram  |

**Life Safety Systems shall include: (To be reviewed by Fire Department)**

- |                                     |                          |  |
|-------------------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 1- a) Occupancy load and egress capacity |
| <input type="checkbox"/>            | <input type="checkbox"/> | b) Early warning                         |
| <input type="checkbox"/>            | <input type="checkbox"/> | c) Smoke control                         |
| <input type="checkbox"/>            | <input type="checkbox"/> | d) Stair pressurization                  |
| <input type="checkbox"/>            | <input type="checkbox"/> | e) Systems schematic                     |

**Occupancy Load/Egress Requirements shall include:**

- |                                     |                                     |   |
|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | 1- a) Occupancy load (gross and net)  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | 2 b) Means of egress <i>LESS THAN 100 FT OF TRAVEL 32 EXIT DOOR Required</i><br>exit access, exit and exit discharge  |
| <input type="checkbox"/>            | <input type="checkbox"/>            | 3 c) Stair construction/geometry and protection   |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | d) Doors <i>See SECTION 1025.1</i>  |
| <input type="checkbox"/>            | <input type="checkbox"/>            | 4 e) Emergency lighting and exit signs  |
| <input type="checkbox"/>            | <input type="checkbox"/>            | f) Specific occupancy requirements<br>1. Construction requirements<br>2. Horizontal exits/exit passageways <i>TABLE 1004 Group M under 100 FT OF TRAVEL</i> |

**Structural Requirements shall include:**

- |                                     |                          |  |
|-------------------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 5 a) Soil conditions/analysis  |
| <input type="checkbox"/>            | <input type="checkbox"/> | 6 b) Show type of termite treatment (termicide or alternative method) <i>A-4</i> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | c) Design loads  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | d) Wind requirements <i>120 mph</i>  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | e) Building envelope   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | f) Structural calculations   |
| <input type="checkbox"/>            | <input type="checkbox"/> | g) Foundations <i>Sheet A3</i>   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | h) Wall systems <i>Sheet A-4</i>   |
| <input type="checkbox"/>            | <input type="checkbox"/> | i) Floor systems <i>Sheet A-4</i>  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | j) Roof systems <i>Sheet A3</i>  |
| <input type="checkbox"/>            | <input type="checkbox"/> | k) Threshold inspection plan (if applicable)                                     |
| <input type="checkbox"/>            | <input type="checkbox"/> | l) Stair systems   |











**Materials shall include:**

- |                                     |                                     |   |
|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | a) Wood   |
| <input type="checkbox"/>            | <input type="checkbox"/>            | b) Steel  |
| <input type="checkbox"/>            | <input type="checkbox"/>            | c) Aluminum   |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | d) Concrete   |
| <input type="checkbox"/>            | <input type="checkbox"/>            | e) Plastic  |
| <input type="checkbox"/>            | <input type="checkbox"/>            | 11 f) Glass (mfg. Listing for wind zone including details for installation and attachments) |
| <input type="checkbox"/>            | <input type="checkbox"/>            | g) Masonry  |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | h) Gypsum board and plaster <i>5/8" TYPE "X"</i>  |
| <input type="checkbox"/>            | <input type="checkbox"/>            | i) Insulating (mechanical)  |
| <input type="checkbox"/>            | <input type="checkbox"/>            | 7 j) Roofing (mfg. Listed system for wind zone with installation and attachments)           |
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | k) Insulation <i>See A-3 ROOF A-4 WALLS</i>   |

☒ ☐ ☐ ☐

<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>

[illegible]

<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>
<input checked="" type="checkbox"/>		<input type="checkbox"/>

**Accessibility Requirements shall include:**

- 8 a) Site requirements
- 9 b) Accessible route
- c) Vertical accessibility
- 9 d) Toilet and bathing facilities
- e) Drinking fountains
- f) Equipment
- g) Special occupancy requirements
- h) Fair housing requirements

**Interior Requirements shall include:**

- a) Interior finishes (flame spread/smoke develop) *ALL WALLS TO be 1 hour type*
- b) Light and ventilation
- c) Sanitation

**Special Systems shall include:**

- a) Elevators
- b) Escalators
- c) Lifts

**Swimming Pools – Commercial** – Plans shall be signed and sealed by a Professional Engineer registered in the State of Florida and approved by the Department of Business and Professional Regulation/Health Department indicating compliance with the Florida Administrative Code, Chapter 64E-9 And Section 424 of the Florida Building Code

**Electrical:**

- a) Electrical wiring, services, feeders and branch circuits, over-current protection, grounding, wiring methods and materials, GFCIs
- b) Equipment
- c) Special Occupancies
- d) Emergency Systems
- e) Communication Systems
- f) Low Voltage
- g) Load calculations
- h) Riser diagram

### Plumbing:

- a) Minimum plumbing facilities
- b) Fixture requirements
- c) Water supply piping
- d) Sanitary drainage
- e) Water heaters
- f) Vents
- g) Roof drainage
- h) Back flow prevention
- i) Irrigation
- j) Location of water supply
- k) Grease traps
- l) Environmental requirements
- m) Plumbing riser

<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

**Mechanical:**

- a) Energy calculation (signed and sealed by Architect or Engineer, registered in the State of Florida)
- b) Exhaust systems (clothes dryer exhaust, kitchen equipment exhaust, Specialty equipment exhaust)
- c) Equipment
- d) Equipment location
- e) Make-up air
- f) Roof mounted equipment
- g) Duct systems
- h) Ventilation
- i) Combustion air
- j) Chimneys, fireplaces and vents
- k) Appliances
- l) Boilers
- m) Refrigeration
- n) Bathroom ventilation
- o) Laboratory

<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

**Gas:**

- a) Gas piping
- b) Venting
- c) Combustion air
- d) Chimney's and vents
- e) Appliances
- f) Type of gas
- g) Fireplaces
- h) LP tank locations
- i) Riser diagram/shut offs

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

**Disclosure Statement for Owner Builders**

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

**\*\*\*Notice of Commencement Required Before Any Inspections will be Done**

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

**Private Potable Water:**

- a) Size of pump motor
- b) Size of pressure tank
- c) Cycle stop valve if used

23067

# SIMQUE CONSTRUCTION

P.O. Box 2962  
LAKE CITY, FLORIDA 32056

**DAVID J. SIMQUE**  
CB-C056158

(386) 755-7787 PHONE  
(386) 755-1188 FAX

**TO:** Columbia County Building Dept.  
Lake City, Fl.

**RE:** Elliano's Coffee Shop  
Lake City, Fl.

To Whom It May Concern:

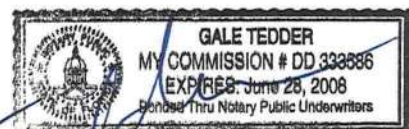
I'm authorizing Arri Phinney to pick -up permits. If you have any questions please call David Simque at (386) 867 - 0294. Thanks

Sincerely,

  
David J. Simque

4/25/05

Gale Tedder



NOTICE OF COMMENCEMENT FORM  
COLUMBIA COUNTY, FLORIDA**\*\*\*THIS DOCUMENT MUST BE RECORDED AT THE COUNTY  
CLERKS OFFICE BEFORE YOUR FIRST INSPECTION.\*\*\***


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.

Tax Parcel ID Number 35-35-16-02585-006


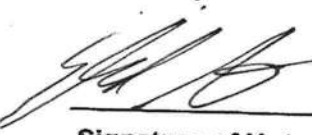
1. Description of property: (legal description of the property and street address or 911 address)  
2915 W US Hwy 90 - Lake City, FL  
Township 3 South - Range 16 East  
COMM Inters of N R/W US 90 & E BNDRY of Brookside S/D, run SE  
along R/W 275.03 FT FOR
2. General description of improvement: Drive thru Coffee Shop (Ellinwa's)
3. Owner Name & Address SPT, LLC PO Box 1208 Lake City, FL 32056  
Interest in Property Leasehold interest
4. Name & Address of Fee Simple Owner (if other than owner): Westfield Group, LLP PO Box  
3566, Lake City, FL 32056
5. Contractor Name Simque Construction Phone Number 755-7787  
Address PO Box 2962 Lake City, FL 32056
6. Surety Holders Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_  
Amount of Bond \_\_\_\_\_
7. Lender Name Mercantile Bank ~~187 SW Baya Dr~~ Phone Number 386-754-7509  
Address 187 SW Baya Dr, Lake City, FL 32025
8. Persons within the State of Florida designated by the Owner upon whom notices or other documents may be served as provided by section 718.13 (1)(a) 7; Florida Statutes:  
Name Scott Stewart Phone Number 386-755-0757  
Address PO Box 1208 Lake City, FL 32056
9. In addition to himself/herself the owner designates Robert Turbeville of  
Mercantile Bank to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) -  
(a) 7. Phone Number of the designee ~~386-758~~ 386-752-5021
10. Expiration date of the Notice of Commencement (the expiration date is 1 (one) year from the date of recording,  
(Unless a different date is specified) \_\_\_\_\_

**NOTICE AS PER CHAPTER 713, Florida Statutes:**

The owner must sign the notice of commencement and no one else may be permitted to sign in his/her stead.

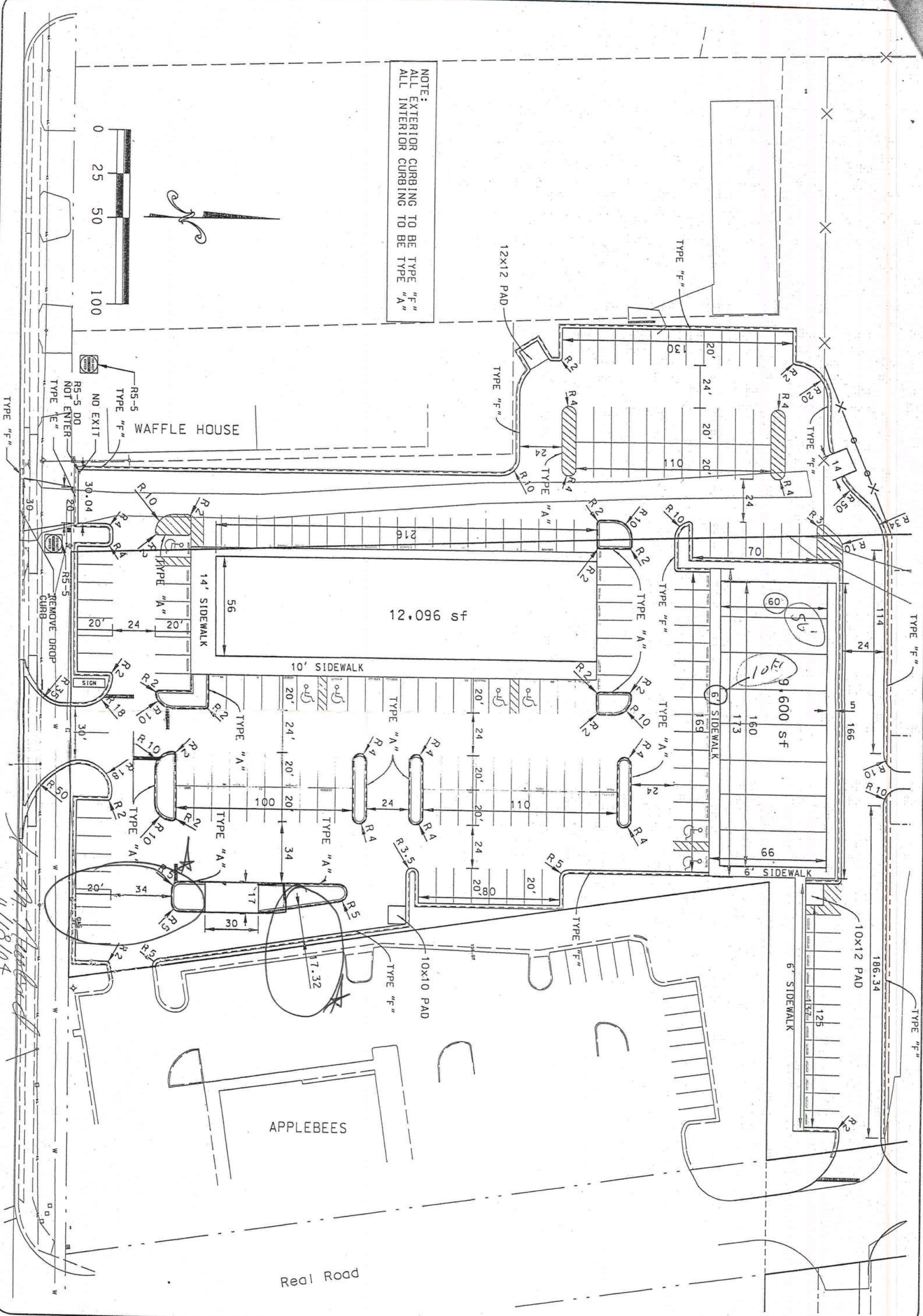
  
\_\_\_\_\_  
Signature of OwnerSworn to (or affirmed) and subscribed before  
day of March 23, 2005

NOTARY STAMP/SEAL

  
  
\_\_\_\_\_  
Signature of NotaryChad Stewart  
My Commission DD036436  
Expires June 25, 2005

Inst:2005009544 Date:04/25/2005 Time:17:02

mk DC, P. Dewitt Cason, Columbia County B:1044 P:777



# Site Layout

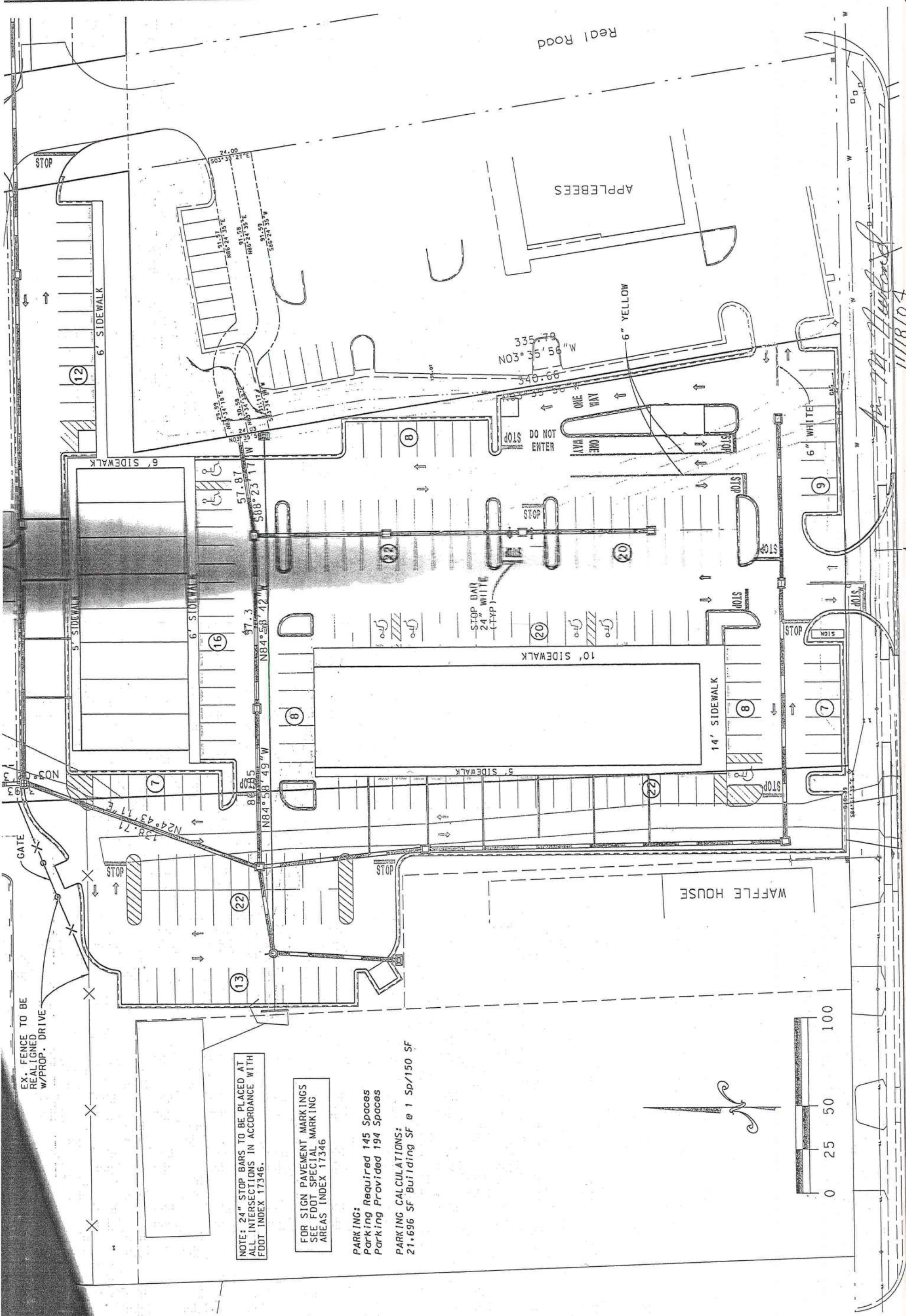


**BAILEY BISHOP & LANE, INC.**  
P. O. BOX 3717  
LAKE CITY, FL 32056-3717  
PH. (386) 752-5640 FAX (386) 755-7771  
Eng. Lic. 7362 Survey Lic. LB-0006685

JOB NO.  
030821 wsc  
SHEET NO.  
3A



# Pavement Markings

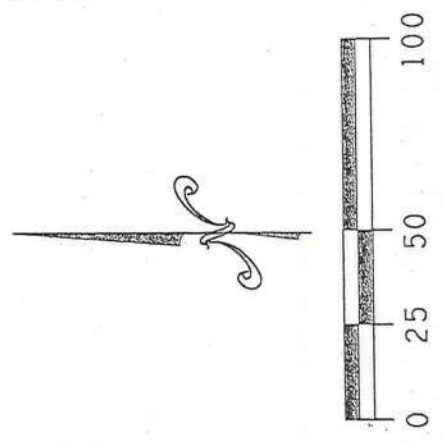


NOTE: 24" STOP BARS TO BE PLACED AT ALL INTERSECTIONS IN ACCORDANCE WITH FOOT INDEX 17346.

FOR SIGN PAVEMENT MARKINGS SEE FOOT SPECIAL MARKING AREAS INDEX 17346

PARKING:  
Parking Required 145 Spaces  
Parking Provided 194 Spaces

PARKING CALCULATIONS:  
21,696 SF Building SF @ 1 Sp/150 SF



*for Mr. Hurd*  
11/18/04