

DATE 12/06/2004

**Columbia County Building Permit****PERMIT****This Permit Expires One Year From the Date of Issue****000022563**

APPLICANT CAROLYN A. PARLATO PHONE 386.963.1373  
 ADDRESS 7161 152ND STREET WELLBORN FL 32094  
 OWNER REND A K. WEBB PHONE 386.755.8967  
 ADDRESS 1189 NW SOPHIE DRIVE WHITE SPRINGS FL 32096  
 CONTRACTOR MICHAEL PARLATO PHONE 386.963.1373  
 LOCATION OF PROPERTY 41-N TO SUWANNEE VALLEY TL, TO WHITE SPRINGS RD TR, GO TO SOPHIE RD MAKE R, FOLLOW TIL PAVEMENT STOPS. KEEP STRAIGHT  
 TYPE DEVELOPMENT M/H UTILITY ESTIMATED COST OF CONSTRUCTION .00  
 HEATED FLOOR AREA                      TOTAL AREA                      HEIGHT .00 STORIES                       
 FOUNDATION                      WALLS                      ROOF PITCH                      FLOOR                       
 LAND USE & ZONING A-3 MAX. HEIGHT                       
 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. 023-04-049

PARCEL ID 20-2S-16-01661-000 SUBDIVISION                       
 LOT                      BLOCK                      PHASE                      UNIT                      TOTAL ACRES 50.00  
IH0000336  
 Culvert Permit No.                      Culvert Waiver                      Contractor's License Number                      Applicant/Owner/Contractor                       
 EXISTING                      04-0571-N BLK HD N  
 Driveway Connection                      Septic Tank Number                      LU & Zoning checked by                      Approved for Issuance                      New Resident                       
 COMMENTS: FINISH FLOOR TO BE 89'

Check # or Cash 5231

**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                      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 \$ .00 CERTIFICATION FEE \$ .00 SURCHARGE FEE \$ .00  
 MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 56.70 WASTE FEE \$ 122.50  
 FLOOD ZONE DEVELOPMENT FEE \$ 50.00 CULVERT FEE \$                      **TOTAL FEE** 479.20  
 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 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.

## For Office Use Only

## MOBILE HOME INSTALLATION APPLICATION

AP# 0411-28Zoning Official BLK 15.11.04Building Official HO 12.2-04Date Received 11-8-04By CHPermit # 22563Flood Zone AEDevelopment Permit YESZoning ESA-2Land Use Plan Map Category ESA

Comments \_\_\_\_\_

FEMA Map # 0105Elevation 88'Finished Floor 89'River SuwanneeIn Floodway NO☒ Site Plan with Setbacks shown☒ Environmental Health Signed Site Plan☐ Env. Health Release☒ Well letter provided☐ Existing Well

Revised 9-23-04

- Property ID 20-25-16-01661-000 Must have a copy of the property deed
- New Mobile Home \_\_\_\_\_ Used Mobile Home ☒ Year 1997
- Subdivision Information \_\_\_\_\_
- Applicant Carolyn A. Parbato Phone # 963-1373
- Address 7161 152nd St. Wellborn, FL 32094
- Name of Property Owner Renda Kay Webb Phone # 386-755-8967
- 911 Address 1189 NW Sophie Dr. White Springs FL 32096
- Circle the correct power company - FL Power & Light - Clay Electric  
(Circle One) Suwannee Valley Electric Progressive Energy
- Name of Owner of Mobile Home Same Phone # 386-755-8967
- Address Rt. 116 Box 655 Lake City, FL 32055
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 1
- Lot Size 20 acres Total Acreage 50 acres
- Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver Permit
- Driving Directions Take Suwannee Valley Rd to White Springs Road. Make a right. Go to Sophie Rd. Make Right. Follow till payment stops. Go straight on dirt Rd till you see lot 8. Drive way to site is on next lot (9). Property has wood fence across front.
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Name of Licensed Dealer/Installer Michael J. Parbato Phone # 963-1373
- Installers Address 7161 152nd St. Wellborn, FL 32094
- License Number I40000336 Installation Decal # 231595

# PERMIT WORKSHEET

PERMIT NUMBER

Installer

Michael S. Ricketts License # ITH0000336

Address of home being installed

1189 NW Sophie Drive  
White Springs, FL 32096  
Destiny Length x width 116 x 80

Manufacturer

NOTE: if home is a single wide fill out one half of the blocking plan  
if home is a triple or quad wide sketch in remainder of home

I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in

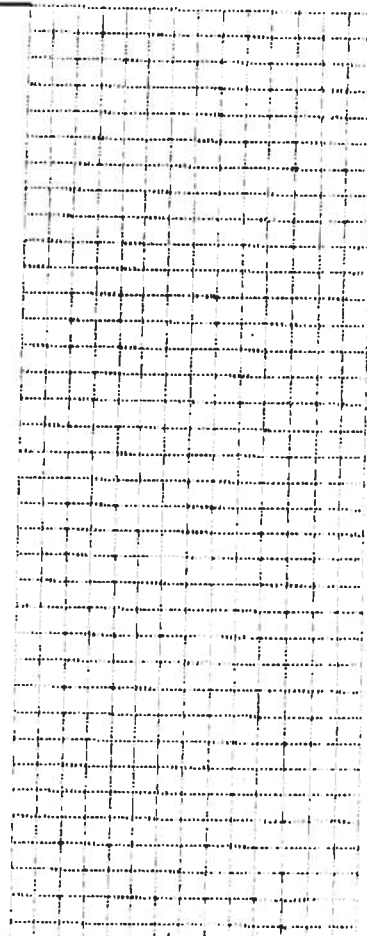
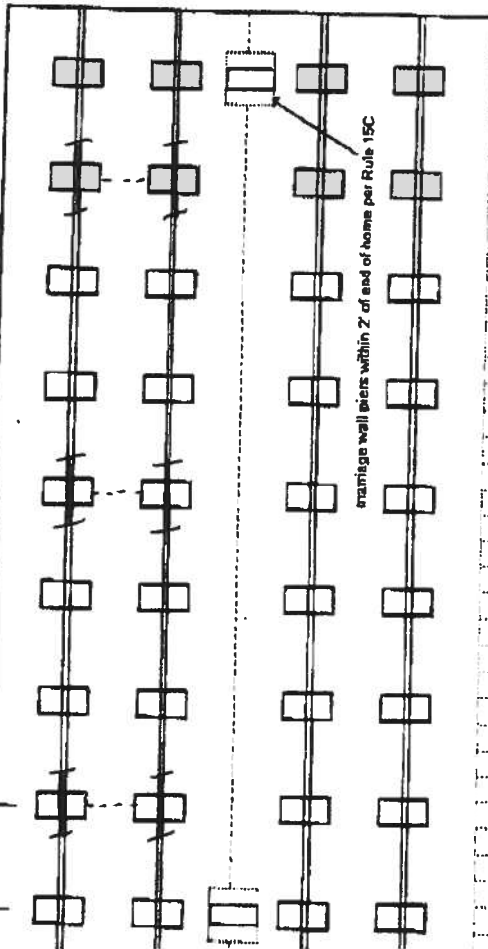
Installer's initials

typical pier spacing

lateral

longitudinal

Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



New Home ☐ Used Home ☒

Home installed to the Manufacturer's Installation Manual ☐

Home is installed in accordance with Rule 15-C ☒

Single wide ☒ Wind Zone II ☒ Wind Zone III ☐

Double wide ☐ Installation Decal # 231595

Triple/Quad ☐ Serial # 00254403

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)	24" x 24" (576)	26" x 26" (676)
1000 psf	3'	4'	4'	5'	6'	7'	8'
1500 psf	4'	5'	6'	7'	8'	9'	10'
2000 psf	5'	6'	7'	8'	9'	10'	11'
2500 psf	6'	7'	8'	9'	10'	11'	12'
3000 psf	7'	8'	9'	10'	11'	12'	13'
3500 psf	8'	9'	10'	11'	12'	13'	14'

\* Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17 x 22

Perimeter pier pad size 17 x 22

Other pier pad sizes (required by the mfg.) N/A

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening Pier pad size

N/A

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

1189 NW Sophie Drive

ANCHORS

4 ft 5 ft

FRAME TIES

within 2' of end of home spaced at 5' 4" oc

OTHER TIES

Number  
Sidewall  
Longitudinal  
Marriage wall  
Shearwall

# PERMIT NUMBER

# PERMIT WORKSHEET

page 2 of 2

## POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing

x 2000 x 2000 x 2000

## POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

x 2000 x 2000 x 2000

## TORQUE PROBE TEST

The results of the torque probe test is 285 inch pounds or check here if you are declaring 5" anchors without testing A test showing 275 inch pounds or less will require 4 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewalk locations. I understand 5 ft. anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb. holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Michael S. Parato

Date Tested

11-5-04

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. N/A

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. N/A

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. N/A

## Site Preparation

Debris and organic material removed ☒

Water drainage: Natural ☒ Swale ☐ Pad ☐ Other ☐

## Fastening multi wide units

Floor: Type Fastener: Length: Spacing: Walls: Type Fastener: Length: Spacing: Roof: Type Fastener: Length: Spacing: For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

## Gasket (see the waterproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials

(initials)

Type gasket

N/A

Installed:

Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes

## Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. N/A Siding on units is installed to manufacturer's specifications. Yes ☒ Fireplace chimney installed so as not to allow intrusion of rain water. Yes N/A

## Miscellaneous

Skirting to be installed. Yes ☒ No ☐ Dryer vent installed outside of skirting. Yes ☒ Range downflow vent installed outside of skirting. Yes ☒ Drain lines supported at 4 foot intervals. Yes ☒ Electrical crossovers protected. Yes ☒ Other: N/A

Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature

Michael S. Parato

Date 11-5-04

Renda

Prepared By and Return To:  
Chris A. Bullard  
P. O. Box 1432  
Lake City, FL 32056

Property Appraiser's Identification Number:  
01653-108, 01653-109, 01661-00

Purchaser(s) Social Security Number(s):  
406-31-7612

This Contract For Deed, made this 11th day of March A.D. 2004, between Bullard Management Services, Inc., a Florida Corporation, whose mailing address is P. O. Box 1432 Lake City, Florida 32056, hereinafter referred to as "Seller", and Renda K. Webb, a single person whose mailing address is: Rt 16 Box 655, Lake City, Florida 32055, hereinafter referred to as "Purchaser(s)"

Witnesseth, that if the Purchaser(s) shall first make payments and perform the covenants hereinafter mentioned on her part to be made and performed, the Seller hereby covenants and agrees to convey and assure to said Purchaser(s) her heirs, executors, administrators or assigns, in fee simple, clear of all encumbrances whatever, by good and sufficient Warranty Deed, the following described property situate in the County of Columbia, State of Florida, known and described as follows, to wit:

Lots 8 and 9 of Rolling Pines Subdivision according to the plat thereof recorded in Platt Book 5, Page 75 of the public records, Columbia County, Florida. This Contract for Deed is given subject to Deed Restrictions recorded in ORB 616 Pages 564-571, Columbia County, Florida and easements of record. Along with the SW 1/4 of NW 1/4 of Section 20, Township 2 South, Range 16 East, Columbia County, Florida. (Containing 48 acres + or -)

Improvements include a well and septic tank. Purchaser to purchase permits and hook up improvements.

The total agreed upon purchase price of the property shall be Ninety Three Thousand Dollars

(\$ 93,000.00 ) Dollars, payable at the times and in the manner following: Twelve Hundred Fifty

(\$ 1,250.00 ) Dollars down, receipt of which is hereby acknowledged, and the balance of

\$ 91,750.00 Dollars shall be paid over a period of 239 months with the sum of \$ 886.00

being due on April 15th, 2004 and a like sum of \$ 886.00 due on the 15th of each month

thereafter until principle and interest are paid in full with an interest rate of 10 percent per annum.

Purchasers understand portions of this property are located in the Flood Plane of the Suwannee River as designated by the FEMA map.

Purchaser(s) have the right to make prepayment at any time without penalty.

At such time as the Purchaser(s) shall have paid the full amount due and payable under this Contract, or at such times as provided herein, the Seller promises and agrees to convey the above described property to the Purchaser(s) by good and sufficient Warranty Deed, subject to restrictions set forth by the Seller.

The Seller warrants that the title to the property can be fully insured by any title insurance company authorized to do business in the State of Florida.

Purchaser(s) shall be permitted to go into possession of the property covered by this Contract immediately and shall assume all liability for all Property Taxes and Special Assessments from this date hereafter.

Purchaser(s) acknowledge receipt of an amortization schedule listing all payments mentioned herein and their corresponding interest and principal amounts. Purchaser(s) acknowledge receipt of this Contract.

Purchaser(s) may not cut or remove any merchantable timber from the property without written

8084-424-28E

consent of the Seller during the term of this Contract or during the term of any mortgage given to Seller as provided herein. In the event Seller grants permission to cut or remove timber, all money derived from the sale thereof shall be applied against the remaining balance in inverse order.

The time of payment shall be of the essence, and in the event of any default of payment of any of the purchase money as and when it becomes due, or in performance of any other obligations assumed by Purchaser(s) in this Contract, including the payment of Property Taxes and Special Assessments, and in the event that the default shall continue for a period of Ninety (90) days, then the Seller may consider the whole balance due under this Contract immediately due and payable and collectable, or Seller may rescind this Contract, retaining the cash consideration paid for it as liquidated damages, and this Contract then shall become null and void and the Seller shall have the right to re-enter and immediately take possession of the property covered by this Contract. In the event that it is necessary for the Seller to enforce this Contract by foreclosure proceedings, or otherwise, all costs of the proceedings, including a reasonable attorney's fee, shall be paid by the Purchaser(s). Installments not paid within Ten (10) days after becoming due under the terms of this Contract shall be subject to, and it is agreed Seller shall collect a late charge in the amount of Ten Percent (10%) of the monthly payment per month upon such delinquent installments. Any payment made by check which is returned unpaid by the bank will require Purchaser(s) to pay a \$25.00 penalty for such dishonored check.

In the event this Contract is assigned, sold, devised, transformed, quit-claimed or in any way conveyed to another by the Purchaser(s), then, in that event, all of the then remaining balance shall become immediately due and collectable.

Purchaser(s) acknowledge that they have personally inspected subject property and found it to be as represented. Purchaser(s) further agrees that the property is suitable for the purpose for which it is being purchased.

IT IS MUTUALLY AGREED, by and between the parties hereto, that the time of each payment shall be an essential part of this Contract, and that all covenants and agreements herein contained shall extend to and be obligatory upon the heirs, executors, administrators and assigns of the respective parties.

IN WITNESS WHEREOF, the parties of these presents have hereunto set their hands and seals the day and year first above written. Before I (we) signed this Contract, I (we) received a copy of the restrictions and I (we) personally inspected the above referenced property.

Purchaser(s):

Holly Wise  
Witness:

Renda K. Webb  
Renda K. Webb

Holly Wise  
Witness: Printed Name

Ethel M. Rasor  
Witness:

Ethel M. Rasor  
Witness: Printed Name

Seller: Bullard Management Services, Inc.

Chris A. Bullard, President  
Chris A. Bullard, President

STATE OF FLORIDA  
COUNTY OF COLUMBIA

I hereby certify that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, appeared Renda K. Webb who has produced Florida Driver's License as identification and Chris A. Bullard well known to me to be the President respectively of the corporation named as party of the first part in the foregoing instrument, and that they severally acknowledged executing the same in the presence of two witnesses freely and voluntarily under authority duly vested in them by said corporation and that the seal affixed thereto is the true corporate seal of said corporation.

Witness my hand and official seal in the County and State last aforesaid this 1<sup>st</sup> Day of March 20 04.

Notary

Ethel M. Rasor



Ethel M. Rasor  
MY COMMISSION # 00816117  
April 8, 2005  
BONDED THIRD PARTY INSTRUMENTS, INC.

# COLUMBIA COUNTY 9-1-1 ADDRESSING

Section

## 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: 5-14-04

ENHANCED 9-1-1 ADDRESS:

1189 NW Sophie Dr. (White Springs, FL 32096)

Addressed Location 911 Phone Number: N/A

OCCUPANT NAME: Renda Webb

OCCUPANT CURRENT MAILING ADDRESS: Rt 16 Box 655  
Lake City, FL 32055


PROPERTY APPRAISER MAP SHEET NUMBER: 18

PROPERTY APPRAISER PARCEL NUMBER: 20-25-16-01661-000

Other Contact Phone Number (If any):

Building Permit Number (If known):

Remarks: Multiple Prop.

Address Issued By:   
Columbia County 9-1-1 Addressing Department

**LYNCH WELL DRILLING, INC.**

RT. 8 BOX 484  
LAKE CITY, FL 32025  
PHONE (386) 752-6677  
FAX (386) 752-1477

**RESIDENTIAL WATER WELL BUILDING PERMIT INFORMATION**

Building Permit # \_\_\_\_\_ Owners Name \_\_\_\_\_

Well Depth 180 Ft. Casing Depth 130 Ft. Water Level 120 Ft.

Casing Size 4 PVC \_\_\_\_\_ Steel X

Pump Installation: Submersible X Deep Well Jet \_\_\_\_\_ Shallow Well \_\_\_\_\_

Pump Make Aermotor Pump Model # 920-100 Hp 1

System Pressure (PSI) \_\_\_\_\_ On 30 Off 50 Avg. Pressure \_\_\_\_\_ (PSI)

Pumping System GPM at average pressure and pumping level 20 (GPM)

Tank Installation: Precharged (Baldder) X Atmospheric (Galvanized)

Make Challenger Model PC 244 Size 81 Gallon

Tank Draw-down per cycle at system pressure 25.1 Gallons

**I HEREBY CERTIFY THAT THIS WATER WELL SYSTEM HAS BEEN  
INSTALLED AS PER ABOVE INFORMATION.**

Lynch Well Drilling  
Signature

Lynch Well Drilling, Inc.  
Print Name

1274 or 2609  
License Number

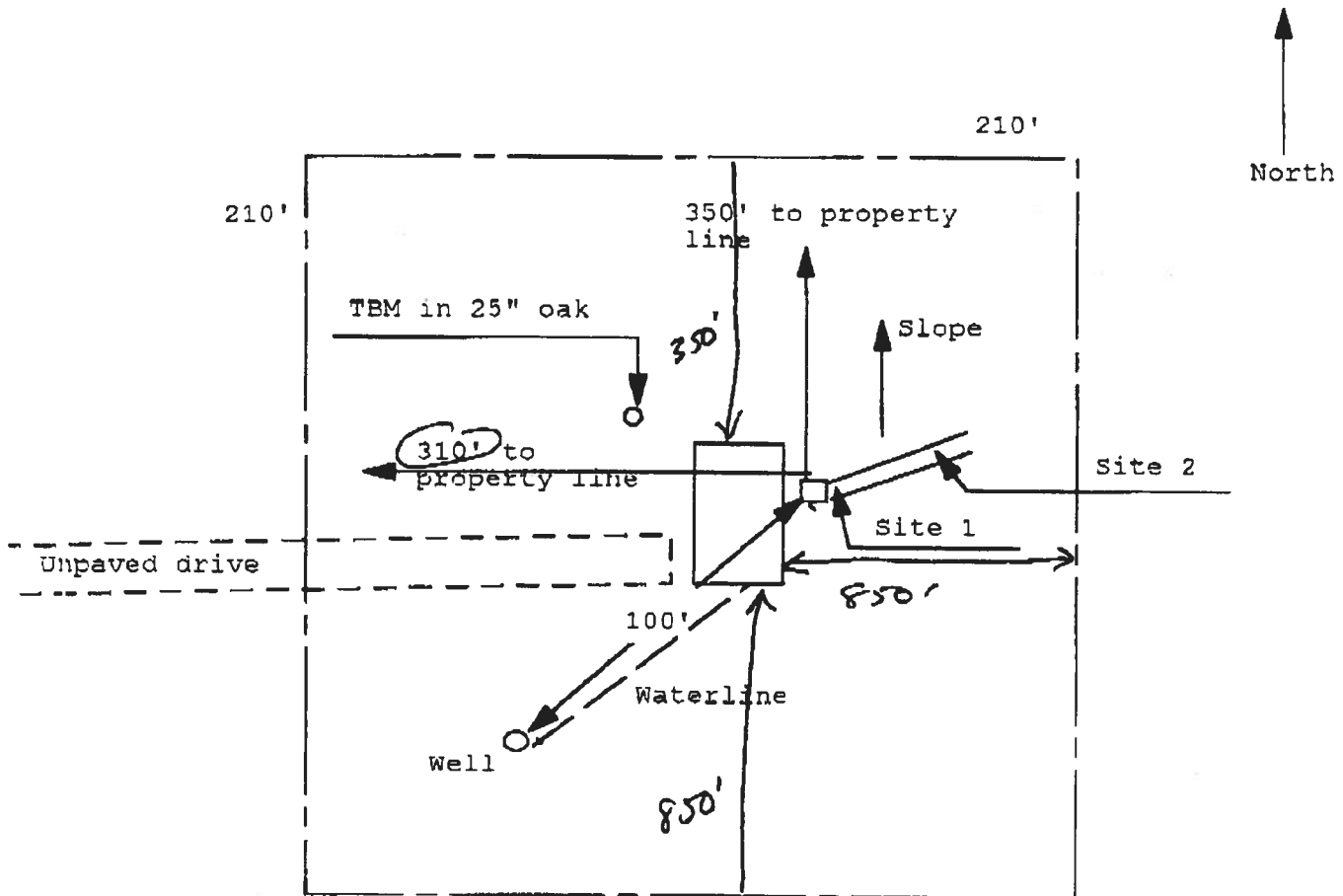
\_\_\_\_\_  
Date



Application for Onsite Sewage Disposal System  
Construction Permit. Part II Site Plan  
Permit Application Number: 04-0571N

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

WEBB/CR 03-2023



40 acres, no other  
structures on property

1 inch = 50 feet

Site Plan Submitted By

Plan Approved Paul L. [Signature]

Not Approved

Date

4/29/04

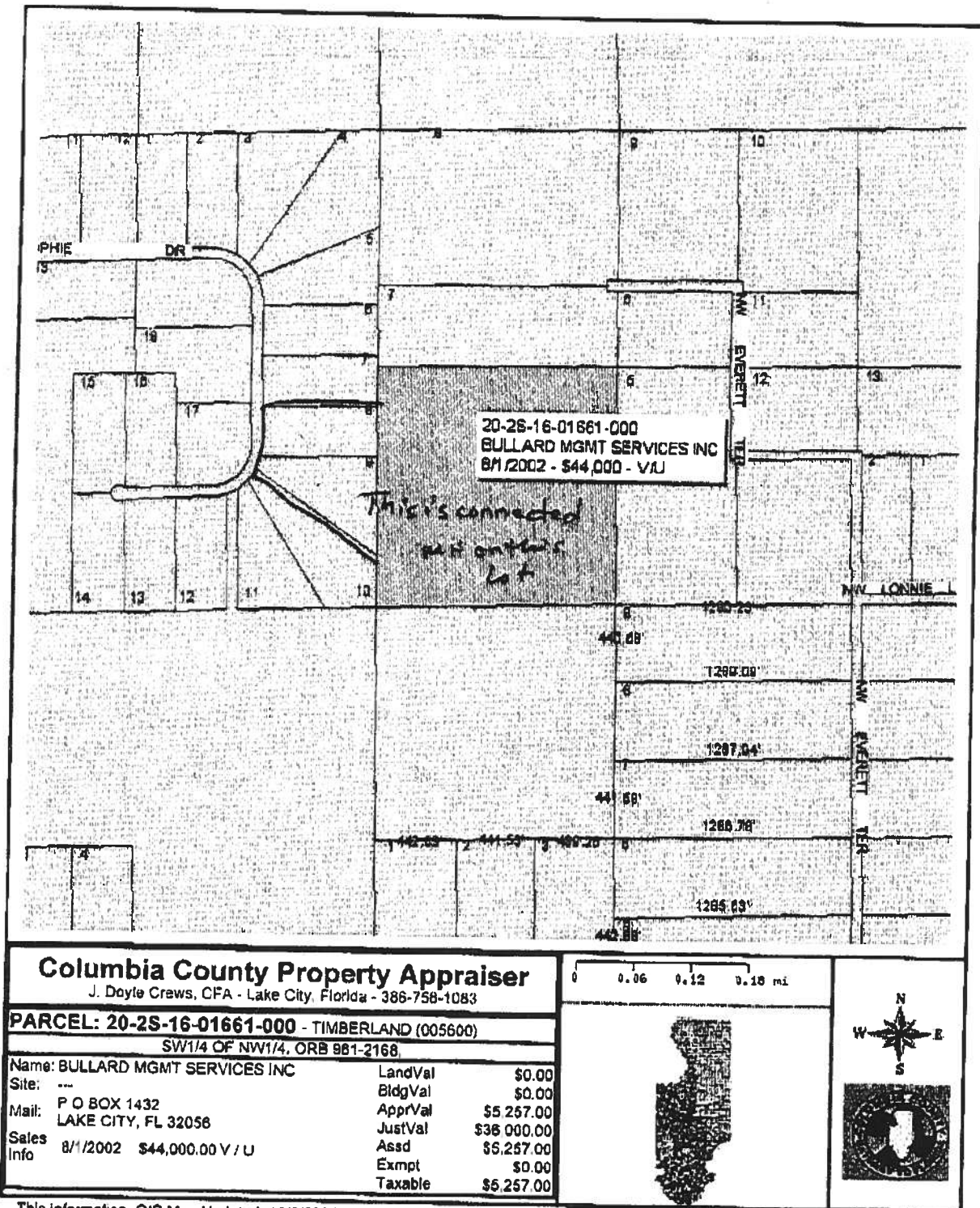
By

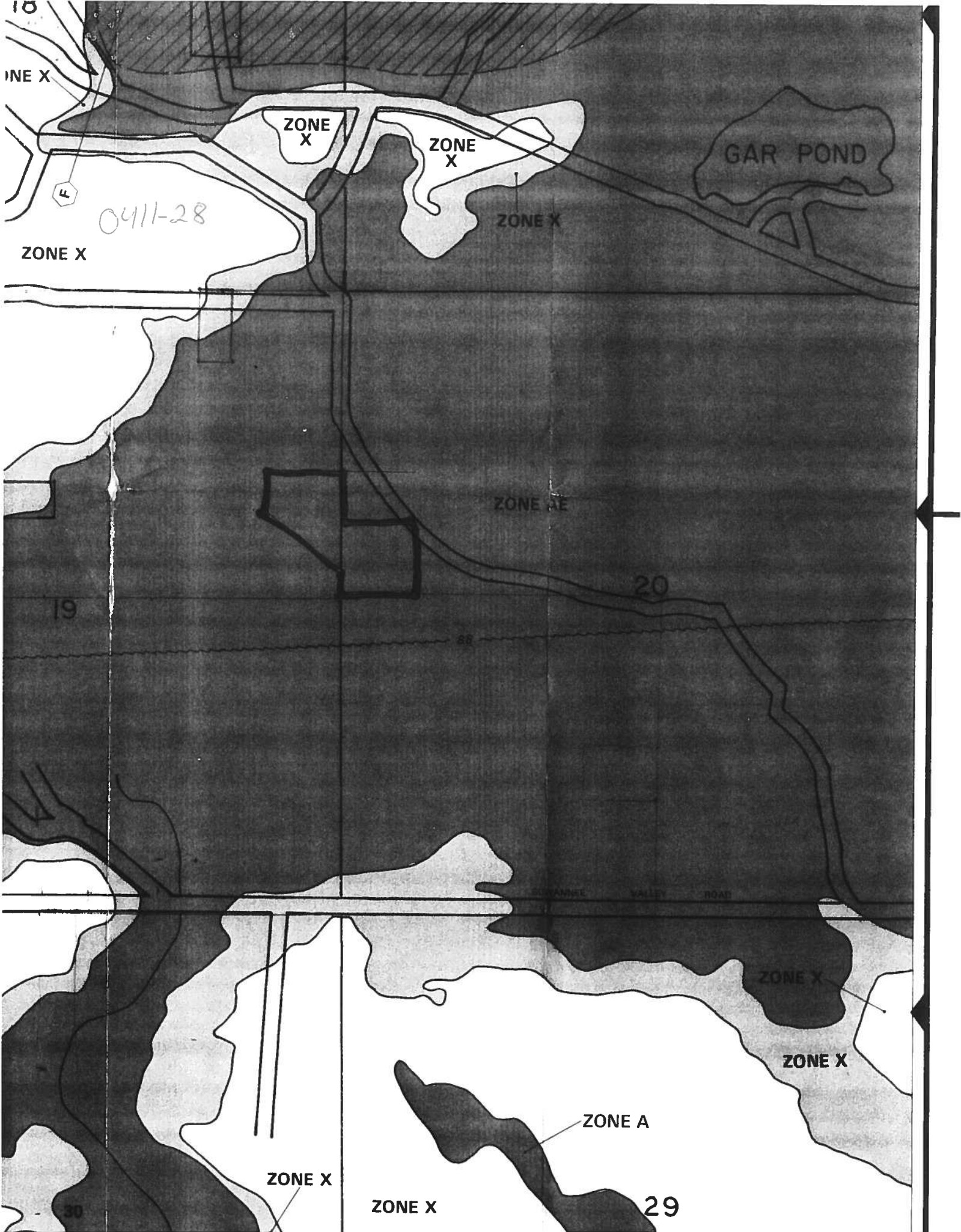
Paul L. [Signature]

7-9-04

C. CPHU

Notes:





1121 112222 -  
04-0571-N

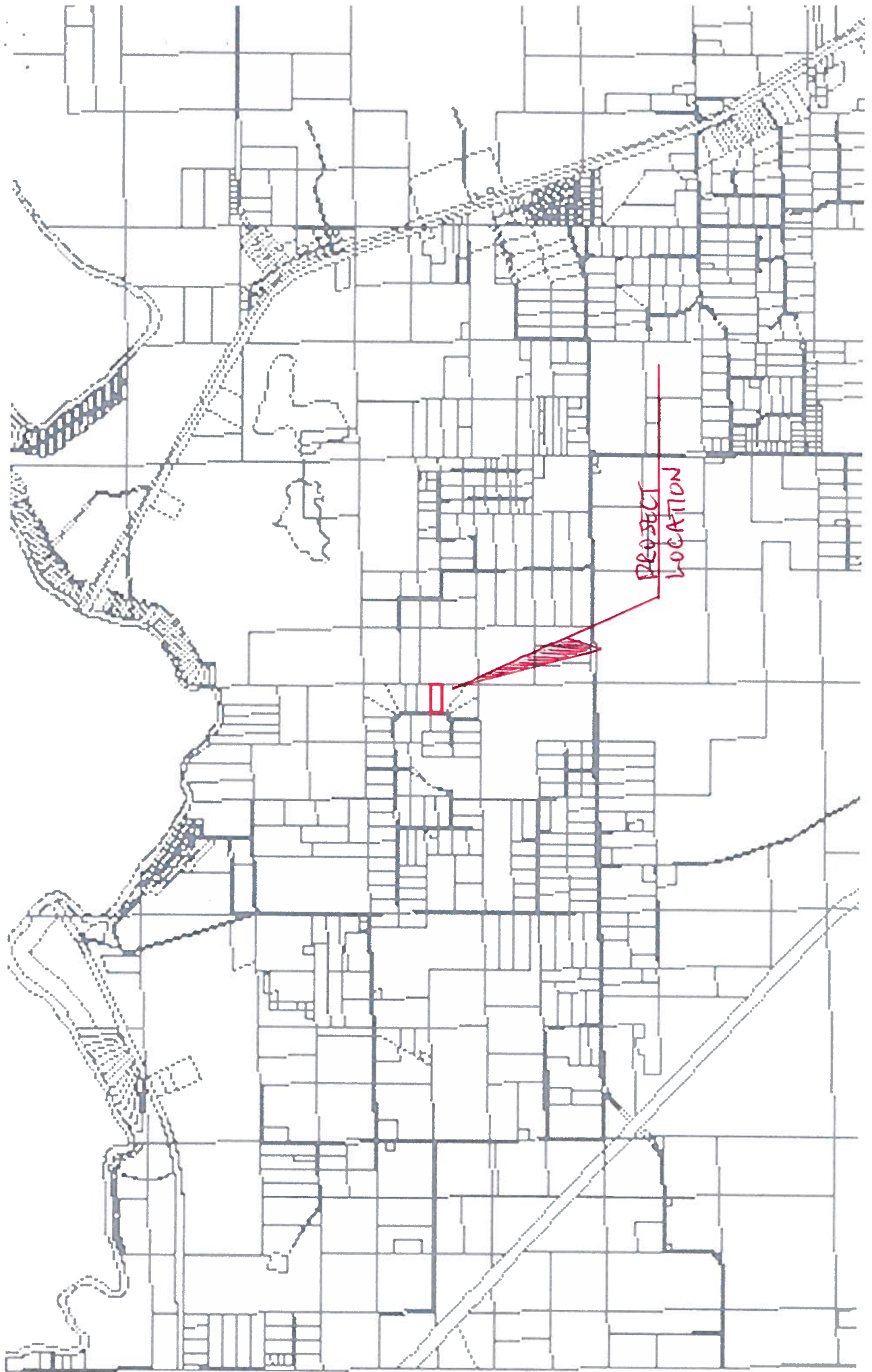
**MARK D. DUREN, P.S.M.**  
**PROFESSIONAL SURVEYOR AND MAPPER**

July 6, 2004

		<b>NORTH</b>	<b>EAST</b>	<b>ELEVATION</b>
TP	1)	5000.0000	5000.0000	0.0
TP	5)	5835.9800	5000.0000	94.88
20" Oak	25)	5849.9401	5301.5536	88.33
Test Hole for Septic	26)	5826.2836	5353.1474	86.38
Test Hole for Septic	27)	5839.0642	5372.6648	85.94
Top of 4" Well	30)	5773.1694	5293.8260	90.26

**NOTE:**

Points 26 and 27 are also proposed building site as well.





DEPARTMENT OF  
**CODE ENFORCEMENT**  
COLUMBIA COUNTY, FLORIDA

**PRELIMINARY MOBILE HOME INSPECTION REPORT**

DATE RECEIVED 11-5-04 BY LH

IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? No

OWNERS NAME Renda Kay Webb PHONE 755-8967 CELL 352-494-6667

911 ADDRESS 1189 NW Sophie Dr. White Springs, FL 32096

MOBILE HOME PARK no SUBDIVISION no

DRIVING DIRECTIONS TO MOBILE HOME 90 W, @ Koonville Rd

CONTRACTOR C&M PHONE \_\_\_\_\_ CELL \_\_\_\_\_

**MOBILE HOME INFORMATION**

MAKE Oakwood YEAR 1997 SIZE 16 X 80

COLOR Grey SERIAL No. OW 54403 6A

WIND ZONE H SMOKE DETECTOR Yes

INTERIOR:  
FLOORS ✓

DOORS ✓

WALLS ✓

CABINETS ✓

ELECTRICAL (FIXTURES/OUTLETS) ✓

EXTERIOR:  
WALLS / SIDING ✓

WINDOWS ✓

DOORS ✓

STATUS:  
APPROVED ✓ WITH CONDITIONS: \_\_\_\_\_

NOT APPROVED \_\_\_\_\_ NEED REINSPECTION \_\_\_\_\_

INSPECTOR SIGNATURE Dan [Signature] NUMBER 306

Call to meet her and look at M/H

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

BUILDING OWNER'S NAME  
RENDA WEBB

For Insurance Company Use:

Policy Number

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.  
NW SOPHIE DRIVE

Company NAIC Number

CITY  
LAKE CITY

STATE  
FL

ZIP CODE  
32055

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

LOT 8, ROLLING PINES AND THE N 1/2 OF THE SW 1/4 OF NW 1/4 OF SECTION 20, TOWNSHIP 2 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FL

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)  
RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL)  
( ##° - ##' - ###.###" or ###.#####")  
N/A

HORIZONTAL DATUM:  
☒ NAD 1927 ☐ NAD 1983

SOURCE: ☐ GPS (Type): \_\_\_\_\_  
☐ USGS Quad Map ☐ Other: \_\_\_\_\_

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

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER  
COLUMBIA COUNTY, FLA. 120070

B2. COUNTY NAME  
COLUMBIA

B3. STATE  
FLORIDA

B4. MAP AND PANEL  
NUMBER  
120070 0105

B5. SUFFIX  
B

B6. FIRM INDEX DATE  
1/6/1988

B7. FIRM PANEL  
EFFECTIVE/REVISED DATE  
1/6/1988

B8. FLOOD ZONE(S)  
AE

B9. BASE FLOOD ELEVATION(S)  
(Zone AO, use depth of flooding)  
88

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): N/A

B11. Indicate the elevation datum used for the BFE in B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe): N/A

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

## 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 5 (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 1929 Conversion/Comments \_\_\_\_\_

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

- o a) Top of bottom floor (including basement or enclosure) 90. 3 ft.(m)
- o b) Top of next higher floor NA. ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) NA. ft.(m)
- o d) Attached garage (top of slab) NA. ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) NA. ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 85. 5 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 87. 4 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade NA
- o i) Total area of all permanent openings (flood vents) in C3.h NA sq. in. (sq. cm)

License Number, Embossed Seal,  
Signature, and Date

SMO  
LS 4708  
12/17/04

## 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 MARK D. DUREN

LICENSE NUMBER LS 4708

TITLE PROFESSIONAL SURVEYOR AND MAPPER

COMPANY NAME MARK D. DUREN SURVEYING

ADDRESS  
120 N.W. BURK AVENUE

CITY  
LAKE CITY

STATE  
FL

ZIP CODE  
32025

SIGNATURE

DATE  
12/17/2004

TELEPHONE  
386-758-9831

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

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

1189 NW SOPHIE DRIVE

CITY  
LAKE CITYSTATE  
FLZIP CODE  
32055

For Insurance Company Use:

Policy Number

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**

MOBILE HOME. A BENCHMARK WAS SET IN A 20" OAK TREE (NAIL, ELEVATION IS 88.33 FEET, NGVD 29 DATUM). OAK TREE IS 261'

EAST OF THE SW 1/4 OF THE NW 1/4 AND 182' NORTH OF THE SOUTH LINE OF THE NORTH 1/2 OF THE SW 1/4 OF THE NW 1/4. FLOOR OF

☐ 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

NA

ADDRESS

NA

CITY

STATE

ZIP CODE

SIGNATURE

DATE

TELEPHONE

COMMENTS NA

☐ 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



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.

<b>SECTION A - PROPERTY OWNER INFORMATION</b>			For Insurance Company Use:
BUILDING OWNER'S NAME RENDA WEBB			Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. NW SOPHIE DRIVE			Company NAIC Number
CITY LAKE CITY	STATE FL	ZIP CODE 32055	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 8, ROLLING PINES AND THE N 1/2 OF THE SW 1/4 OF NW 1/4 OF SECTION 20, TOWNSHIP 2 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FL.			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL			
LATITUDE/LONGITUDE (OPTIONAL) ( ##° - ##' - ###" or ###"###") N/A		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): <input checked="" 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 COLUMBIA COUNTY, FLA. 120070		B2. COUNTY NAME COLUMBIA		B3. STATE FLORIDA	
B4. MAP AND PANEL NUMBER 120070 0105	B5. SUFFIX B	B6. FIRM INDEX DATE 1/6/1988	B7. FIRM PANEL EFFECTIVE/REVISED DATE 1/6/1988	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 88

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): N/A

B11. Indicate the elevation datum used for the BFE in B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe): N/A

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

## 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 5 (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 1929 Conversion/Comments \_\_\_\_\_

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

- o a) Top of bottom floor (including basement or enclosure) 89. 0 ft.(m)
- o b) Top of next higher floor NA. \_\_\_\_ ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) NA. \_\_\_\_ ft.(m)
- o d) Attached garage (top of slab) NA. \_\_\_\_ ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) NA. \_\_\_\_ ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 86. 0 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 88. 2 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade NA
- o i) Total area of all permanent openings (flood vents) in C3.h NA sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

*Mark D. Duren*  
LS 4708  
11/19/2004

## 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.

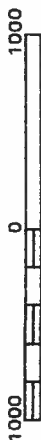
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME MARK D. DUREN LICENSE NUMBER LS 4708

TITLE PROFESSIONAL SURVEYOR AND MAPPER	COMPANY NAME MARK D. DUREN SURVEYING
ADDRESS 120 N.W. BURK AVENUE	CITY LAKE CITY
SIGNATURE <i>Mark D. Duren</i>	STATE FL
	ZIP CODE 32025
	DATE 11/19/2004
	TELEPHONE 386-758-9831



APPROXIMATE SCALE IN FEET



NATIONAL FLOOD INSURANCE PROGRAM

**FIRM**  
FLOOD INSURANCE RATE MAP

COLUMBIA  
COUNTY,  
FLORIDA  
(UNINCORPORATED AREAS)

PANEL 105 OF 290

PANEL LOCATION



COMMUNITY-PANEL NUMBER  
120070 0105 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/nifmap](http://www.fema.gov/nifmap)

**Columbia County Building Department  
Flood Development Permit**

**Development Permit  
F 023- 023-04-049**

DATE 12/06/2004 BUILDING PERMIT NUMBER 000022563  
APPLICANT CAROLYN A. PARLATO PHONE 386.963.1373  
ADDRESS 7161 152ND STREET WELLBORN FL 32094  
OWNER RENDA K. WEBB PHONE 386.755.8967  
ADDRESS 1189 NW SOPHIE DRIVE WHITE SPRINGS FL 32096  
CONTRACTOR MICHAEL PARLATO PHONE 386.963.1373  
ADDRESS 7161 152ND STREET WELLBORN FL 32094  
SUBDIVISION \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase \_\_\_\_\_  
TYPE OF DEVELOPMENT M/H UTILITY PARCEL ID NO. 20-2S-16-01661-000

FLOOD ZONE AE BY BLK 1-6-88 FIRM COMMUNITY #. 120070 - PANEL #. 0105 B  
FIRM 100 YEAR ELEVATION 88.0' PLAN INCLUDED YES or NO  
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 89.0'  
IN THE REGULATORY FLOODWAY YES or (NO) RIVER SUNWIND  
SURVEYOR / ENGINEER NAME Wm Freeman LICENSE NUMBER 56001  
William

☒ ONE FOOT RISE CERTIFICATION INCLUDED

☐ ZERO RISE CERTIFICATION INCLUDED

☐ SRWMD PERMIT NUMBER \_\_\_\_\_  
(INCLUDING THE ONE FOOT RISE CERTIFICATION)

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED 12-17-04

INSPECTED DATE \_\_\_\_\_ BY \_\_\_\_\_

COMMENTS awaits finish floor elevation certificate

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

## ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

22563

## SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME RENDA WEBB		For Insurance Company Use: Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1189 NW SOPHIE DRIVE		Company NAIC Number
CITY LAKE CITY	STATE FL	ZIP CODE 32055
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 8, ROLLING PINES AND THE N 1/2 OF THE SW 1/4 OF NW 1/4, 2009 TAX PARCEL ID. NOS 20-2S-16-01661-000 AND 19-2S-16-01653-108		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) ( ##° - ##' - ###" or ###.####") N/A	HORIZONTAL DATUM: <input checked="" 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 COLUMBIA COUNTY, FLA. 120070		B2. COUNTY NAME COLUMBIA		B3. STATE FLORIDA	
B4. MAP AND PANEL NUMBER 120070 0105	B5. SUFFIX B	B6. FIRM INDEX DATE 1/6/1988	B7. FIRM PANEL EFFECTIVE/REVISED DATE 1/6/1988	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 88

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): N/A

B11. Indicate the elevation datum used for the BFE in B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe): N/A

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

## 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 5 (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 1929 Conversion/Comments \_\_\_\_\_

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

☐ a) Top of bottom floor (including basement or enclosure) 90. 3 ft.(m)

☐ b) Top of next higher floor NA. ft.(m)

☐ c) Bottom of lowest horizontal structural member (V zones only) NA. ft.(m)

☐ d) Attached garage (top of slab) NA. ft.(m)

☐ e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) NA. ft.(m)

☐ f) Lowest adjacent (finished) grade (LAG) 85. 5 ft.(m)

☐ g) Highest adjacent (finished) grade (HAG) 87. 4 ft.(m)

☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade NA

☐ i) Total area of all permanent openings (flood vents) in C3.h NA sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date


LS 4708  
 Previously issued  
 12/17/2004  
 8/26/2009  
 04-977

## 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.

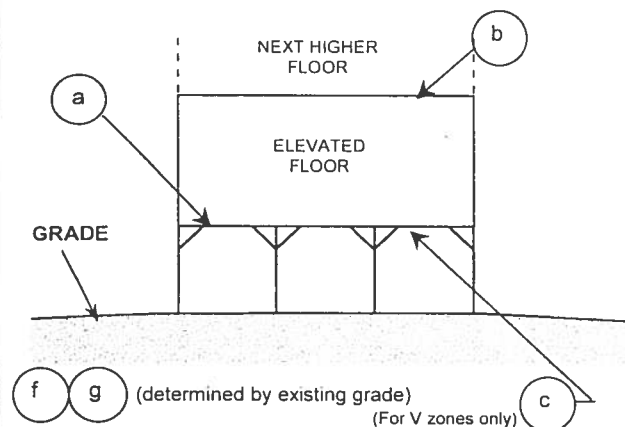
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME MARK D. DUREN		LICENSE NUMBER LS 4708	
TITLE PROFESSIONAL SURVEYOR AND MAPPER	COMPANY NAME MARK D. DUREN SURVEYING		
ADDRESS 120 N.W. BURK AVENUE	CITY LAKE CITY	STATE FL	ZIP CODE 32025
SIGNATURE 	DATE 12/17/2004	TELEPHONE 386-758-9831	

**DIAGRAM 5**

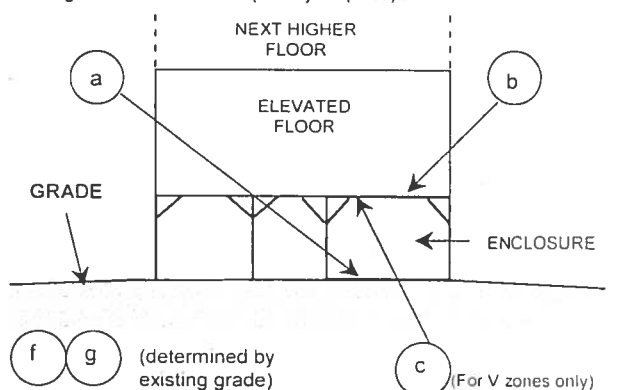
All buildings elevated on piers, posts, piles, columns, or parallel shear walls. No obstructions below the elevated floor.

**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**

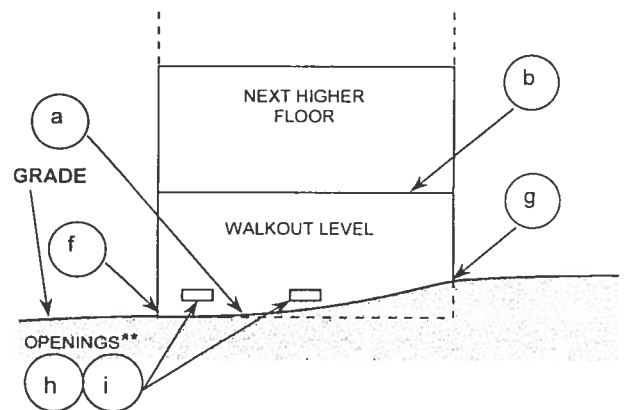
All buildings elevated on piers, posts, piles, columns, or parallel shear walls with full or partial enclosure below the elevated floor.

**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**

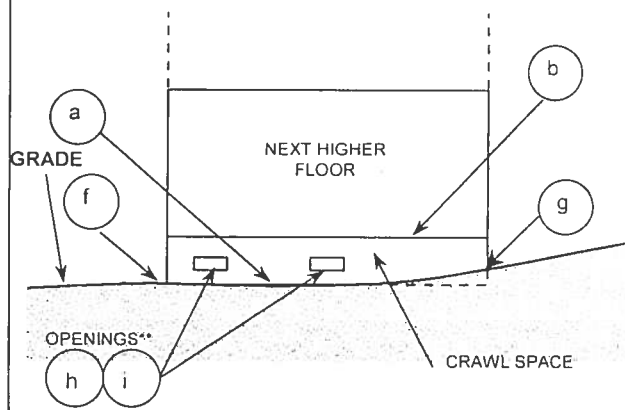
All buildings elevated on full-story foundation walls with a partially or fully enclosed area below the elevated floor. This includes walkout levels, where at least one side is at or above grade. The principal use of this building is located in the elevated floors of the building.

**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, with or without an attached garage.

**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.



Engineers • Planners

161 N.W. Madison St., Suite 102  
Lake City, Florida 32055  
Tel: 386-758-4209  
Fax: 386-758-4290

11/22/2004

Columbia County Building Department

To whom it may concern,

RE: Renda Webb , NW Sophie Drive

I have reviewed the conditions for the referenced property. The property is located in a flood zone (Zone AE). The required floor elevation (89.00') shall be set 1' above the 100 year flood elevation. The 100 year flood elevation is established at 88.00' as indicated by benchmark. Please find a copy of the calculations verifying the flood rise to be less than 1'-0". If you have any questions, please call me at (386) 758-4209.

Sincerely,

A handwritten signature in blue ink that reads "William H. Freeman".

William Freeman, P.E.

Freeman Design Group, Inc.  
161 NW Madison St., Ste. # 102  
Lake City, FL 32055  
(386) 758-4209

1-ft Rise Flood Certification Calculations		
Project: Renda Webb, Residential		
Single-Wide Mobile Home, 16X80		
Footing Area (sf):	1.333 (16" sq. piers)	1.78 sf per pier
No. Piers/Row:	6	
No. Rows:	4	
Rise Ht(ft):	3	
Contributing Area:	40.00 acres ----->	1,742,400.00 sf
New Ftg Area:		42.645 sf
Net Land Area (contributing minus new):		1,742,357.35 sf
Pier Area (ftg. Area*No. Piers*Rise):		127.94 cf
Amount of Rise (pier area / land area) x 12:		0.001 in

*John H. Free*  
*11/23/04*