DATE 03/15/2004 Columbia County	
This Permit Expires One Yes	ar From the Date of Issue 000021617 PHONE 497-2311
A DODESS BO BOX 20	FT WHITE FL 32038
OWNER LAURA MOORE	PHONE 800-388-9140
ADDRESS 1366 SW CENTRAL TERRACE	FORT WHITE FL 32038
CONTRACTOR CHESTER KNOWLES	PHONE 755-6441
LOCATION OF PROPERTY TO FT WHITE TAKE WILSON SE	PRINGS RD R NEWAK, L ILLINOIS, R
CENTRAL THEN 1ST DRIVE ON	N LEFT
TYPE DEVELOPMENT MH. UTILITY EST	FIMATED COST OF CONSTRUCTION .00
HEATED FLOOR AREA TOTAL AREA	A HEIGHT00 STORIES
FOUNDATION WALLS RO	OOF PITCH FLOOR
LAND USE & ZONING ESA -2	MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 30.00	REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE AE	DY-025
PARCEL ID 25-68-15-00952-000 SUBDIVISION	
LOT 30/31 BLOCK PHASE UNIT 17	7 TOTAL ACRES 2.00
1H0000509	Road D 2
Culvert Permit No. Culvert Waiver Contractor's License Numb	ber Applicant/Owner/Contractor
EXISTING 04-0255-N BK	RK Y
Driveway Connection Septic Tank Number LU & Zoning	g checked by Approved for Issuance New Resident
COMMENTS: ONE FOOT RISE LETTER SUBMITTED, FLOOR MUS	ST BE SET AT 35'
FINISH FLOOR ELEVATION REQUIRED FOR FINAL POWER	
	Check # or Cash 8731
FOR BUILDING & ZONING	(footer/Stab)
Temporary Power Foundation date/app. by	date/app. by date/app. by
	date/app. by date/app. by Sheathing/Nailing
date/app. by	date/app. by date/app. by
	ove slab and below wood floor
date/app. by Electrical rough-in	date/app by
date/app. by	Peri, beam (Lintel) date/app, by date/app, by
Permanent power C.O. Final	Culvert
date/app. by da M/H tie downs, blocking, electricity and plumbing	ate/app. by date/app. by
date/app.	by Pool date/app. by
Reconnection Pump pole date/app. by date/app.	ualciabb. ov
	Utility Pole
M/H Pole Travel Trailer	Utility Pole
M/H Pole Travel Trailer	Utility Pole date/app. by
M/H Pole Travel Trailer	Utility Pole app. by Re-roof te/app. by date/app. by
M/H Pole Travel Trailer date/app. by dat	Utility Pole date/app. by Re-roof date/app. by S00 SURCHARGE FEE S00
M/H Pole Travel Trailer date/app. by dat BUILDING PERMIT FEE S .00 CERTIFICATION FEE	Utility Pole date/app. by Re-roof te/app. by date/app. by S00 SURCHARGE FEE S00 FIRE FEE S39.69 WASTE FEE S85.75
M/H Pole date/app. by Travel Trailer date BUILDING PERMIT FEE S .00 CERTIFICATION FEE MISC. FEES \$ 200.00 ZONING CERT. FEE S .000	Utility Pole date/app. by Re-roof te/app. by date/app. by S00 SURCHARGE FEE S00 FIRE FEE S

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 Department Flood Development Permit

Development Permit F 023- 04-028

DATE <u>03/15/2004</u> BUILDING PERM	IT NUMBER 000021617					
APPLICANT ROCKY FORD	PHONE 497-2311					
ADDRESS PO BOX 39	FT WHITE FL	32038				
OWNER LAURA MOORE	PHONE 800-388-9140					
ADDRESS 1366 SW CENTRAL TERRACE	FORT WHITE FL	32038				
CONTRACTOR CHESTER KNOWLES	PHONE <u>755-6441</u>					
ADDRESS PO BOX 328	LAKE CITY FL	32056				
SUBDIVISION THREE RIVERS	Lot <u>30/31</u> Block Unit	Phase				
TYPE OF DEVELOPMENT MH, UTILITY	PARCEL ID NO. 25-6	S-15-00952-000				
FLOOD ZONE AE BY BK 1-6-88	FIRM COMMUNITY #. 120070 -	PANEL#. 255 B				
FIRM 100 YEAR ELEVATION 3 41						
REQUIRED LOWEST HABITABLE FLOOR ELEVA	TION 35 /					
IN THE REGULATORY FLOODWAY YES or NO	RIVER					
SURVEYOR / ENGINEER NAME Mark Diso	LICENSE NUMBI	ER				
ONE FOOT RISE CERTIFICATION INC.	LUDED					
ZERO RISE CERTIFICATION INCLUDE						
	עט					
SRWMD PERMIT NUMBER						
(INCLUDING THE ONE FOOT RISE CERTIFICATION)						
DATE THE FINISHED FLOOR ELEVATION CERTI	FICATE WAS PROVIDE <u>D</u>					
INSPECTED DATE BY	_					
COMMENTS						
COMMENTS						

135 NE Hernando Ave., Suite B-21

Lake City, Florida 32055 Phone: 386-758-1008 Fax: 386-758-2160



OFFICE OF THE **BUILDING INSPECTOR**

Called in

COLUMBIA COUNTY, FLORIDA

POWER RELEASE NUMBER: 000021617	
DATE FAXED TO POWER COMPANY: 04/19/2004	BY:
PROPERTY OWNER INFORMATION:	
NAME LAURA MOORE	PHONE 800-388-9140
ADDRESS 1366 SW CENTRAL TERRACE	FL 32038
SUBDIVISION THREE RIVERS	Lot30/3Block Unit 17 Phase
DIRECTIONS TO FT WHITE TAKE WILSON SPRIN	NGS RD R NEWAK, L ILLINOIS, R
CENTRAL THEN 1ST DRIVE ON LEFT	
PARCEL ID # 25-6S-15-00952-000	_
THIS IS AN AUTHORIZATION TO: TURN ON PERMANENT POWER TO MH.	
DATE: <u>04/08/2004</u> INSPECTED BY	Y: RK
RECONNECTION / SERVICE CHANGE M DATE: INSPECTED BY	
TURN ON TEMPORARY SERVICE DATE: INSPECTED BY:	:
POWER COMPANY:	
CLAY ELECTRIC	
FLORIDA POWER & LIGHT	
SUWANNEE VALLEY ELECTRIC	
PROGRESSIVE ENERGY OF FLORIDA	

135 NE HERNANDO AVE., SUITE B-21 LAKE CITY, FL 32055

PH: 386-758-1008 FX: 386-758-2160





OGGETANGY

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 25-6S-15-00952-000

Building permit No. 000021617

Permit Holder CHESTER KNOWLES

Owner of Building LAURA MOORE

Location: 1366 SW CENTRAL TERRACE, FT. WHITE

Date: 04/19/2004

Building Inspector

POST IN A CONSPICUOUS PLACE (Business Places Only)

*** The well affidavit, from the well onlier, is required before the permit can be issued.

***This application must be ,completely, filled out to be accepted. Incomplete applications will not be accepted.

For Office Hos Only	Zoning Official_	BLK Buil	ding Official 2K3-9-64
AP# 0403 05 Date Rec	03/21/04	Demit	21617
Flood Zone AE Development Permit	YES Zoning	54-2 Land Use Pl	an Map Category ESA
Comments Development Comments			
Comments			*
	•		
Property ID # 00-00-00-007	752-080	(Must have a co	opy of the property dee
New Mobile Home	Used Mobile Hon	ne	Year_2004
Applicant Rocky Ford		Phone # 380	6-497-2311
Address PD Box 39	FT WhITH,	PZ, 320	58
Addioss	11	800-388-9140	- SECONO CONTO
Name of Property Owner	EH MOORE	Phone#_	316-17-
Name of Property Owner Address Po Sox 603, Fr	White, FL, 32	038	
 Name of Owner of Mobile Home 	Coole	Phor	1e #
Address	SHAVIL		
 Relationship to Property Owner _ 	SAME		
 Current Number of Dwellings on I 	~		
	Total Ac		•
■ Lot Size 200 x 400		reage / a CA	11/00
 Current Driveway connection is _ 	COLUMN	CXI	157175
 Is this Mobile Home Replacing ar 		ne <i>\</i> \^\cap_	
	•		
Name of Licensed Dealer/Installe	PESSTR L. CHRS.	THE KLOWES PH	one #
Installers Address 70 Kgx 32	8. LAKE (My. FL	(20)6	
• License Number IN 0000	509	Installation De	cal #_215407

The Permit Worksheet (2 pages) must be submitted with this application.

Installers Affidavit and Letter of Authorization must be notarized when submitted.

Parcel ID: 00-00-00-00952-000

Columbia County Property Appraiser

Owner & Property Info

The second secon	
Owner's Name	MOORE LAURA F
Site Address	
Mailing Address	P O BOX 603 FT WHITE, FL 32038
Brief Legal	LOTS 30 & 31 UNIT 17 THREE RIVERS ESTATES. ORB 628-244, WD 1001-1696.

Show Tax Info | GIS Map | Property Card

	William Control of the Control of th
Use Desc. (code)	VACANT (000000)
Neighborhood	100000.17
Tax District	3
UD Codes	
Market Area	02
Total Land Area	1.836 ACRES

Property & Assessment Values

Total Appraised Value		\$10,200.00
XFOB Value	cnt: (0)	\$0.00
Building Value	cnt: (0)	\$0.00
Ag Land Value	cnt: (0)	\$0.00
Mkt Land Value	cnt: (1)	\$10,200.00

Just Value	\$10 <i>,2</i> 00.00
Class Value	\$0.00
Assessed Value	\$9,180.00
Exempt Value	\$0.00
Total Taxable Value	\$9,180.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
12/5/2003	1001/1696	WD	V	Q		\$14,000.00
8/1/1981	474/223	WD	V	Q		\$6,000.00

Building Characteristics

building Citat	adear in the					
Bidg Item	Bidg Desc	Year Bit	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Extra Features & Out Buildings

EXLIA FEBR	ures a or	ic ballanigs				
Code	Desc	Year Bit	Value	Units	Dims	Condition (% Good)
				NONE		

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000000	VAC RES (MKT)	2.000 LT - (1.836AC)	1.00/1.00/1.00/1.00	\$5,100.00	\$10,200.00

2-24-04

I Jessie C. Chester Knowles ques permission for Rocky Ford to pull move on permit for CAURA Moore To place a skyline Home 32x80 on her property.

#DD235355
#DD235355
#DD235355

Rotaly: Boby Withali I H 0000 509

Mobile Home Installers Affidavit

Florida Statue Section 320.8249 Requires Mobile Home Installers to be Licensed:

Any person who engages in mobile home installation shall obtain a mobile home installers license from the Bureau of Mobile Home and Recreational Vehicle construction of the Department of Highway Safety and Motor Vehicles Pursuant to this section.

Please Type or Print License No. It 0000509
do hereby state that the installation of the manufactured home at:
911 Address of the Job site
Will be done under my supervision. Signature
Sworn to and subscribed before me this 34 day of February A.D. 2006/ Notary Public Shall Line My Commission Expires: 5-pt. 7-2007 Signature
Produce Valid Identification: #DD235355 #DD235355 Stamp 4 Fain-Insulation

nect electrical conductors between multi-wide units, but not to the main power ce. This includes the bonding wire between mult-wide units. Pg /5C -	And 10 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	nstaller Name Septent Cheater Knowles	Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall 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 requires anchors with 4000 lb holding capacity. ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER	- ii	× 1.0 × 1.0 × 1.0	3. Using 500 lb increments, take the lowest reading and round down to that increment.		1. Test the perimeter of the home at 6 locations	× 10 ASSumed 1000# × 1.0	The pocket penetrometer tests are rounded down to or check here to declare 1000 the soil without testing.	POCKET PENETROMETER TEST
	유민무공	D S	TSE I	70	0 20 3	- 1	ſ	77 <			, ,

rect all potable water supply piping to an existing water meter, water tap, or other perdent water supply systems. Pg. (5C-)

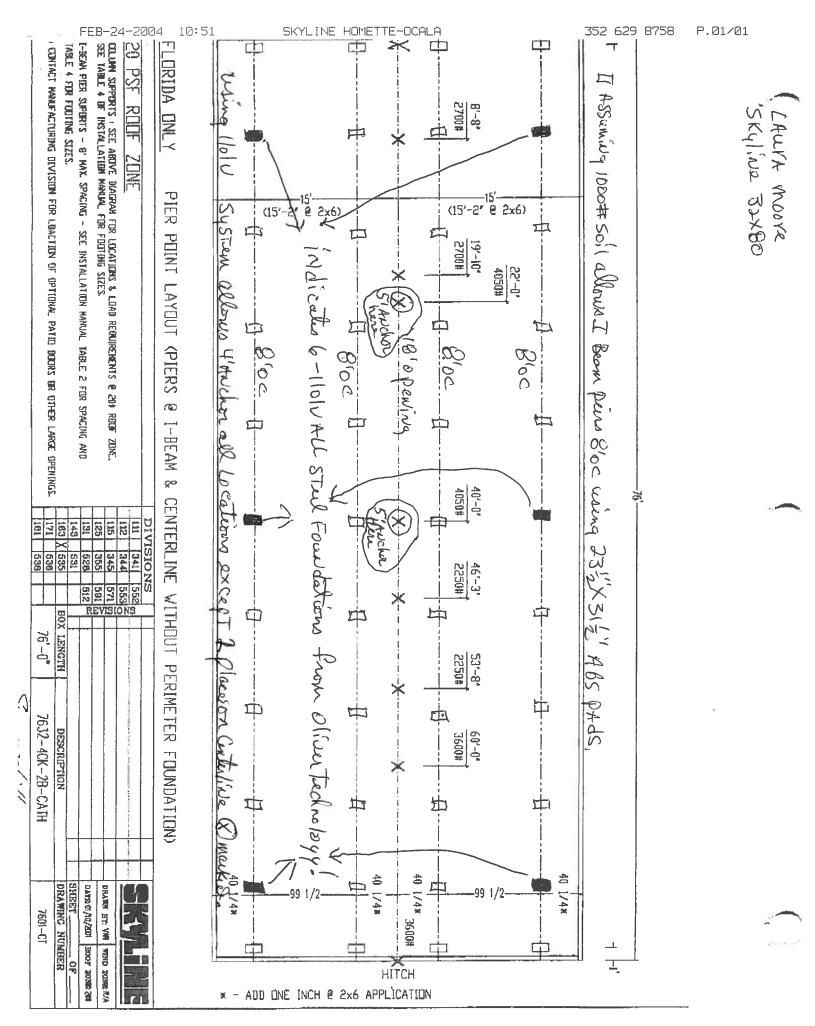
nect all sewer drains to an existing sewer tap or septic tank. Pg.

1501

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 installar Signature Flags Figure Manufacture and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

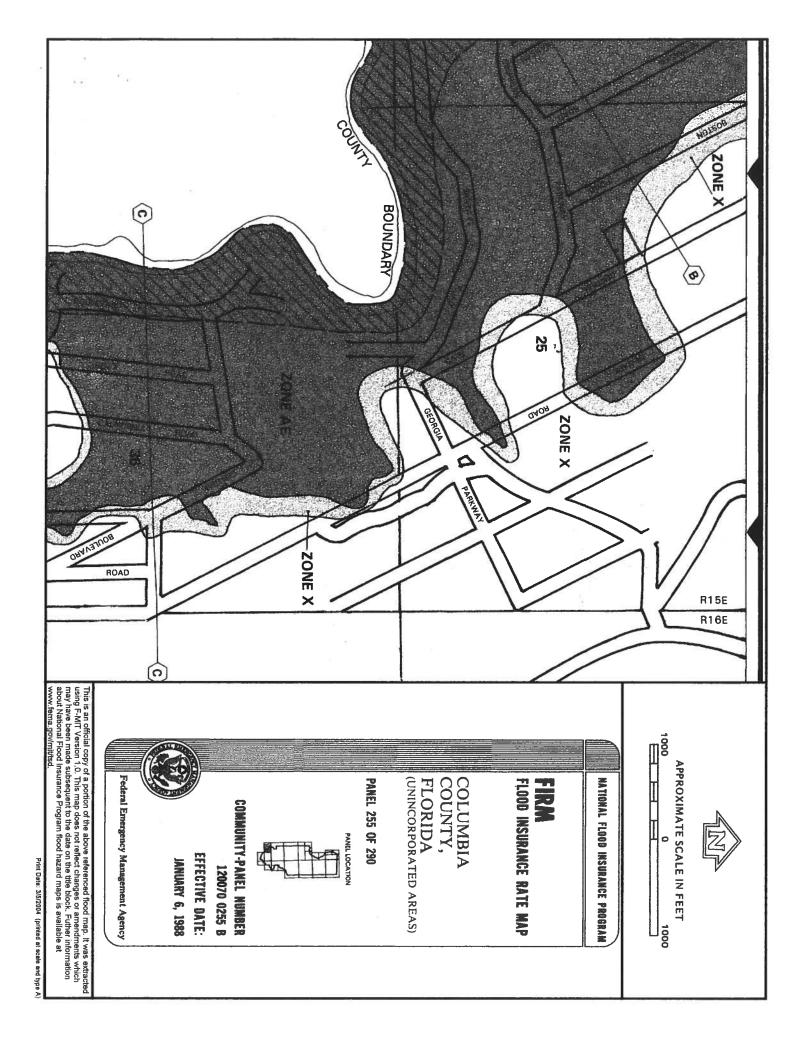
irting to be installed. Yes No ver vent installed outside of skirting. Yes NIA inge downflow vent installed outside of skirting. Yes ain lines supported at 4 foot intervals. Yes ectrical crossovers protected. Yes her:
Miscellaneous
e bottomboard will be repaired and/or taped. Yes Pg. /SC-/ding on units is installed to manufacturer's specifications. Yes replace chimney installed so as not to allow intrusion of rain water. Yes
Weatherproofing
Installer's initials Installer's initials
understand a property installed gasket is a requirement of all new and used omes and that condensation, mold, meldew and buckled marriage walls are result of a poorly installed or no gasket being installed. I understand a striplet will not serve as a gasket.
Gasket (weetherproofing requirement)
Valls: Type Fastener: 442 Length: 411 Spacing: 24 '' Valls: Type Fastener: 422 Length: 411 Spacing: 24'' toof: Type Fastener: 12465 Length: 611 Spacing: 46'' 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
Fastening multi wide units
Debris and organic material removed Yes Compaded fill Valer drainage: Natural Swale Pad Other
Site Preparation



RON E. BIAS WELL DRILLING

RT.2 BOX 5340 FT. WHITE, FLORIDA 32038 (904) 497-1045 MOBILE: 364-9233

TO: County Building Department
Description of well to be installed for Customer: LAURA Merrical Located at Address: SW CRATRAL DERK
1 hp – 1 ½" drop over 86 gallon tank, 250 gallon equivalent captive with back flow preventer. 35-gallon draw down with check valve pass requirements.
Ron Bias



AT: POCKY 758.2160 STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number 04-035 Scale: Each block represents 10 feet and 1 inch = 40 feet Notes: Site Plan submitted by: Plan Approved L Not Approved 8y_ Date 3-4-04 Cambia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 10/98 (Replaces HRS-H Form 4016 which may be used) (Stock Number: 5744-002-4016-6)

Page 2 of 4

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

		7				— ₁
		SECTION	A - PR	OPERTY OWNER INFORMA	TION	For Insurance Company Use:
BUILDING OWNER'S NAME Laura Moore						Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. P.O. Box 39						Company NAIC Number
CITY Fort White				STATE FI	ZIP C 3203	
			el Numb	ber, Legal Description, etc.)		
	·		000001	etc. Use a Comments area, if a	necessary)	
Residential		denual, Addition, Acc	essory,			
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: ☐ GPS (Type): (##°-##'-##.##" or ##.####") NAD 1927 ☐ NAD 1983 ☐ USGS Quad Map ☐ Other:						
	S	SECTION B - FLOOR) INSU	RANCE RATE MAP (FIRM) II	NFORMATION	
B1. NFIP COMMUNITY NAME	& COMMUNITY NUM	BER	B2. CO	OUNTY NAME		B3. STATE
120070			Columb	pia		FL
B4. MAP AND PANEL NUMBER 0255	B5. SUFFIX B	B6. FIRM INDEX DAT 6 Jan. 88	E	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 34.00
B10. Indicate the source of the						
	⊠ FIRM	☐ Community De				
B11. Indicate the elevation da					Other (Describe):	Destriction Destrict
B12. Is the building located in				or Otherwise Protected Area (OP/		Designation Date
		***************************************		ATION INFORMATION (SUR	- '	
C1. Building elevations are ba		•		· —	Finished Construction	
*A new Elevation Certifica						
The state of the s			r to the b	ouilding for which this certificate is I	peing completed - see p	ages 6 and 7. If no diagram
accurately represents the						
), AR, AR/A, AR/AE, AR/A1-A30, <i>i</i>		
				Item C2. State the datum used. If t		
				ents and datum conversion calcul	ation. Use the space pr	ovided or the Comments area of
Section D or Section G, a	s appropriate, to do	cument the datum conv	rersion.			
Datum Conversion	on/Comments					
Elevation reference mark	usedDoes t	the elevation reference	mark us	ed appear on the FIRM? 🔲 Yes		
a) Top of bottom floor	(including basement	t or enclosure)		<u>39</u> . <u>10</u> ft.(m)		
b) Top of next higher f	loor		ft.(m)			
C) Bottom of lowest ho	rizontal structural m	ember (V zones only)	39. 10 ft.(m) respectively			
☐ d) Attached garage (top of siab)				ft.(m)	Embo and D	
e) Lowest elevation of machinery and/or equipment					广. 9. 页 <i>a</i>	
servicing the building	ng (Describe in a Co	omments area)		ft.(m)	mbe atur	
f) Lowest adjacent (finished) grade (LAG)				34 . 8 ft.(m)	Nur	
g) Highest adjacent (finished) grade (HAG)				34. 9 ft.(m)	nse O	
☐ h) No. of permanent o			cent ara	— — · ·	License Number, Signature,	
i) Total area of all perm				. (sq. cm)	- '	
				NGINEER, OR ARCHITECT (ERTIFICATION	
This cortification is to be a				, or architect authorized by law		formation
I certify that the information	on in Sections A, B	, and C on this certific	cate rep	presents my best efforts to inter	pret the data available	9.
				isonment under 18 U.S. Code,		
	L. Scott Britt		•		LICENSE NUMBER	P.S.M. # 5757
TITLE Professional S	surveyor and Mappe	r		COMPANY NAME	Britt Surveying	
ADDRESS				CITY	STATI	E ZIP CODE
830 W. Duval Street				Lake City	FL	32055
SIGNATURE (11/1-1			DATE	TELES	PHONE
Tshit	Jul .			04/16/04	(386) 7	752-7163
	/					

IMPORTANT: In those angers	with a narrange district of the	N41 - A		
BUILDING STREET ADDRESS (Including Ant	y the corresponding information from S Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND B	Section A.		For insurance Company Use:
	Office, collect and a blog. No. / OK P.O. ROUTE AND E	SOA NO.		Policy Number
СПҮ	STATI	E	ZIP CODE	Company NAIC Number
SECTI	ON D - SURVEYOR, ENGINEER, OR AF	RCHITECT CERTIFIC	ATION (CONTINUE	(D)
	for (1) community official, (2) insurance agent/o			<u> </u>
COMMENTS				
There is a mobile home on this parcel at the	is time			
(49)				
L-14853				Check here if attachment
	EVATION INFORMATION (SURVEY NO	OT REQUIRED) FOR	ZONE AO AND ZO	NE A (WITHOLT BEF)
For Zone AO and Zone A (without BFE), com	plete Items E1 through E4. If the Elevation Cer	tificate is intended for us	e as supporting informa	tion for a LOMA or LOMR-F
Section C must be completed.				
Building Diagram Number _(Select the bi	uilding diagram most similar to the building for w	rhich this certificate is be	ing completed – see pa	ges 6 and 7. If no diagram accurately
represents the building, provide a sketch of				TE
 The top of the bottom floor (including pase natural grade, if available). 	ement or enclosure) of the building isft.(m)	in.(cm) above or	below (check one)	the highest adjacent grade. (Use
	(see page 7), the next higher floor or elevated flo	oor (elevation h) of the h	ildina is ft/m) ii	n (cm) above the highest ediacest
grade. Complete items C3.h and C3.i on	front of form.			
E4. For Zone AO only: If no flood depth numb	er is available, is the top of the bottom floor elev	rated in accordance with	the community's flood;	lain management ordinance?
	cal official must certify this information in Section			
SECTION TO	ON F - PROPERTY OWNER (OR OWNE	R'S REPRESENTAT	VE) CERTIFICATIO	N
issued BEF) or Zone AO must sign here. The	presentative who completes Sections A, B, C (II ne statements in Sections A, B, C, and E are con	tems C3.h and C3.i only), and E for Zone A (with	nout a FEMA-issued or community-
PROPERTY OWNER'S OR OWNER'S AUT		rea to the best of my kn	owieage. ——————	
	THORIZED REPRESENTATIVE STRAINE			
ADDRESS		CITY	STATI	E ZIP CODE
SIGNATURE		DATE	TELEF	PHONE
COMMENTS				
				Check here if attachments
	SECTION G - COMMUNITY INFO			
ne local official who is authorized by law or orc ertificate. Complete the applicable item(s) and	tinance to administer the community's floodplain	n management ordinand	e can complete Section	is A, B, C (or E), and G of this Elevation
	a sign below. In from other documentation that has been signe	d and ambassad by a lie	remond augustus and a	
state or local law to certify elevation inf	formation. (Indicate the source and date of the	eu and embossed by a k elevation data in the Con	ensed surveyor, engine aments area below \	er, or architect who is authorized by
A community official completed Section	E for a building located in Zone A (without a FE	EMA-issued or communi	ty-issued BFE) or Zone	AO.
The following information (Items G4-G9	is provided for community floodplain manager	ment purposes.		
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE (CERTIFICATE OF COMPL	LIANCE/OCCUPANCY ISSUED
7.71.				
7. This permit has been issued for: New C	Construction Substantial improvement			
Elevation of as-built lowest floor (including bBFE or (in Zone AO) depth of flooding at the		-	ft.(m)	Datum:
	s burning site is.		ft.(m)	Datum:
LOCAL OFFICIAL'S NAME		TITLE		
COMMUNITY NAME		TELEPHONE		
SIGNATURE		DATE		
COMMENTS				
8.5				
· · · · · · · · · · · · · · · · · · ·				Chook bear if all it
				Check here if attachments

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).

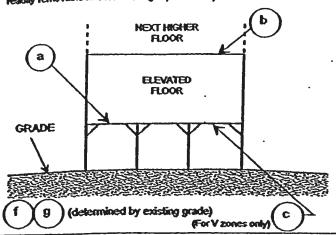


DIAGRAM 6

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 in present in the walls of the enclosure. Indicate information about openings in Section C, Building Elevation Information (Survey Required).

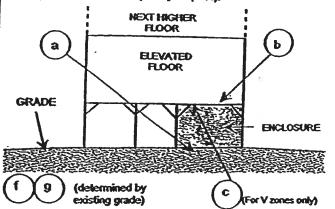


DIAGRAM 7

All buildings elevated on full-story foundation walls with a partialty 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).

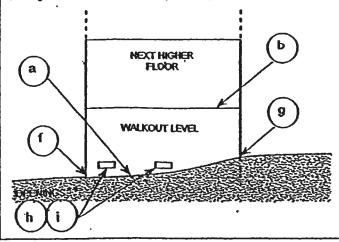
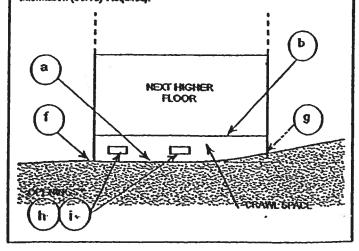


DIAGRAM 8

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.

Mark Disosway, P.E. POB 868, Lake City, FL 32056, Ph 386-754-5419, Fax 386-754-6749

One Foot Rise Analysis and Certification, 100 Year Base Flood

LAURA MOORE RESIDENCE, Lot 30&31, Three Rivers Estates, Unit 17, Columbia County, FL

PROPERTY DESCRIPTION: Lot 30&31, Three Rivers Estates, Unit 17, as recorded in plat book 6, page 11 of the public records of Columbia County, Florida.
OWNER: Laura Moore
CONTRACTOR: A&B Construction, Inc.
PROJECT: A mobile home on CMU piers on natural grade with no added fill. A 70' x 32' double section mobile home on no more than $80 - 16$ "x16" CMU piers on natural grade with no added fill.
BASE FLOOD ELEVATION: 34 - 35', Mile 7, Ichetucknee River (Per Britt Surveying WO#13799, Flood Insurance Rate Map, Dated 06Jan88 Community Panel No. 120070 0255 B.)
FLOOD ZONE: AE and X
BASIN AREA AT BASE FLOOD ELEVATION: 647 Acres (Calculated from SRWMD flood plain data.)
PROPOSED BUILDING AREA: Piers 80 * 16" * 16" = 142 ft2.
PROPOSED BUILDING VOLUME BELOW FLOODPLAIN: (Piers) 142 ft2 x 1' = 142 ft3.
EXISTING GRADE ELEVATION AT BUILDING LOCATION: 34'11" average for one foot rise calculations. (Note: Existing grade at mobile home site was established at mobile home location drawn on survey by grade shot by contractor based on Britt benchmark (about 140' from Central Blvd and 15' north of center line of lot 31).)
CALCULATIONS: The project only requires volume calculations in this area since it is not a flowing or riverine area.
Floodplain volume removed = 142 ft3
Floodplain level increase = (142 ft3) / 43560 ft ² /acre / 647 acres = 0.000005 ft

CERTIFICATION:

I hereby certify that construction of LAURA MOORE RESIDENCE, Lot 30&31, Three Rivers Estates, Unit 17, Columbia County, FL will increase flood elevations less than one foot at the project location, to the best of my knowledge.

Mark D. Disosway III

Project No. 403131 Page 1 of 1 Florida Registered P.E. No.53915