

DATE 05/25/2006

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000024560

APPLICANT JAMES MASON PHONE 352.376.2750
ADDRESS 618 S MAIN STREET GAINESVILLE FL 32601
OWNER COLUMBIA COUNTY BANK PHONE 386.754.8888
ADDRESS 1720 W. US HWY 90 LAKE CITY FL 32055
CONTRACTOR WILLIAM GRIGGS PHONE 352.376.2750
LOCATION OF PROPERTY 90-W TO COLUMBIA COUNTY BANK ON THE R.

TYPE DEVELOPMENT SIGNAGE ON BLDG ESTIMATED COST OF CONSTRUCTION 30000.00
HEATED FLOOR AREA TOTAL AREA HEIGHT 35.00 STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING CI MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT REAR SIDE
NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 36-3S-16-02626-008 SUBDIVISION
LOT BLOCK PHASE UNIT TOTAL ACRES

ET11000673
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING-FDOT X-06-0179 BLK JTH N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: NOC ON FILE. 35' HIEGHT LIMITATION.

Check # or Cash 17002

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

BUILDING PERMIT FEE \$ 150.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 0.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ CULVERT FEE \$ TOTAL FEE 200.00
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 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.

Revised 9-23-04

Applicants Name JAMES MASON / GAINESVILLE Phone 1-352-376-2750
Address 618 S. MAIN ST, GAINESVILLE FL. 32601
Owners Name Columbia BANK Phone 386-754-8888
911 Address 1720 W. U.S. Hwy 90, LAKE CITY FL. 32055
Contractors Name William Ralph GRIFFES Phone 1-352-376-2750
Address 618 S. MAIN ST, GAINESVILLE, FL. 32601
Fee Simple Owner Name & Address _____
Bonding Co. Name & Address _____
Architect/Engineer Name & Address _____
Mortgage Lenders Name & Address _____

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Energy
 Property ID Number 36-35-02626-008 Estimated Cost of Construction \$30,000
 Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____
 Driving Directions Proceed west FROM HWY 90 TO 1780 W US HWY
90, Location is Columbia Bank

Type of Construction INSTALL BUILDING SIGNS 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 _____ Side _____ Side _____ Rear _____
 Total Building Height _____ Number of Stories _____ Heated Floor Area _____ Roof Pitch _____

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.


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W. R. Dugg
Owner Builder or Agent (Including Contractor)

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

Sworn to (or affirmed) and subscribed before me
this 10th day of May 2006
Personally known ☒ or Produced Identification

Contractor Signature W.R. Thiggs
Contractors License Number ET 11000673
Competency Card Number _____
NOTARY STAMP/SEAL _____

 Tina M. Wornick
Commission #DD192713
Notary Signature: Mar 15, 2007
Bonded Thru
Atlantic Bonding Co., Inc.

Columbia County Taxing Authorities

135 NE Hernando Ave Suite 238

Lake City, FL 32055

**** Important Tax Information Enclosed ****

2005 Real Estate Property

RETURN SERVICE REQUESTED**NOTICE OF PROPOSED
PROPERTY TAXES
DO NOT PAY
THIS IS NOT A BILL**

The taxing authorities which levy property taxes against your property will soon hold **Public Hearings** to adopt budgets and tax rates for the next year.

The purpose of these **Public Hearings** is to receive opinions from the general public and to answer questions on the proposed tax change and budget **Prior To Taking Final Action**.

Each taxing authority may **Amend or Alter** its proposals at the hearing.

PARCEL ID: 36-3S-16-02626-008*West*

C 23676

43**AUTO**5-DIGIT SCH 32024



COLUMBIA COUNTY BANK

PO BOX 1609

LAKE CITY FL 32056-1609

BEG SE COR OF SEC, RUN W 40 FT
TO W R/W OF CO RD, N ALONG R/W
982 FT FOR POB, RUN SW 64
74.22 FT, NW 53.28 FT, SW
30.55 FT, NW 116.72 FT TO S
R/W US-90, NE ALONG R/W 186.93
FT TO W R/W OF CO RD, S ALONG

Taxing Authority	Your property taxes last year	Your taxes this year if proposed budget change is made	A public hearing on the proposed taxes and budget will be held:	Your taxes this year if no budget change is made
County 002	2,243.39	2,585.99	SEPT 8, 2005, 7:00PM, SCHOOL BOARD ADM BLDG, 372 W DUVAL ST	2,383.29
Public Schools:				
By State Law	1,422.24	1,539.56	SEPT 13, 2005, 7:00PM, SCHOOL BOARD ADM BLDG, 372 W DUVAL ST.	1,512.15
By Local Board	709.58	817.94		754.43
LSHA	385.64	518.62	SEPT 12, 2005 5:30 PM, 368 NE FRANKLIN ST SHANDS AT LAKE SHORE	410.16
CCIDA	35.48	40.90	SEPT 8, 2005, 7:00PM, SCHOOL BOARD ADM BLDG., 372 W DUVAL ST.	37.64
Water Management District				
SRWMD	126.34	145.63	SEPT 13, 2005, 5:30PM, SRWMD, US 90 & CR 49, LIVE OAK	134.31
Independent Special Districts • Voter Approved • Debt Payments				
Total Property Taxes	4,922.67	5,648.64		5,231.98
	COLUMN 1*	COLUMN 2*		COLUMN 3*
Your property value last year:	Market Value 257,093	Assessed Value 257,093	Exemptions	Taxable Value 257,093
Your property value this year:	296,355	296,355		296,355

• SEE REVERSE SIDE FOR EXPLANATIONS

• IF YOU FEEL THE MARKET VALUE OF YOUR PROPERTY IS INACCURATE OR DOES NOT REFLECT FAIR MARKET VALUE, OR IF YOU ARE ENTITLED TO AN EXEMPTION THAT IS NOT REFLECTED ABOVE, CONTACT YOUR COUNTY PROPERTY APPRAISER AT: 135 NE Hernando Ave # 238 Lake City FL 32055 (386) 758-1083

• IF THE PROPERTY APPRAISER'S OFFICE IS UNABLE TO RESOLVE THE MATTER AS TO MARKET VALUE OR AN EXEMPTION, YOU MAY FILE A PETITION FOR ADJUSTMENT WITH THE VALUE ADJUSTMENT BOARD; PETITION FORMS ARE AVAILABLE FROM THE COUNTY PROPERTY APPRAISER AND MUST BE FILED ON OR BEFORE September 6, 2005

DR-474
9/12/04

NOTICE OF COMMENCEMENT

Permit Nr. _____

State of Florida County of COLUMBIA City of LAKE CITYThis document prepared by LARRY SISCO Address 173 NW HILLSBORO LAKE CITY

The undersigned hereby gives notice that improvement(s) 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.

DESCRIPTION OF PROPERTY: Lot: _____ Block: _____

Section _____ Township _____ Range _____

Tax Parcel Nr. 36-35-16-02628-008

Subdivision _____ Platbook _____ Map page _____

Street Address 1720 WEST HIGHWAY 90LAKE CITY FL 32055

GENERAL DESCRIPTION OF IMPROVEMENT

To construct SIGNS and install SIGNS

OWNER INFORMATION

Owner(s) Name COLUMBIA COUNTY BANKAddress 1720 W. HWY 90Phone nr. 386-752-5646City LAKE CITYState FLZip code 32055Interest in property OWNER

Fee simple titleholder name _____

Fee simple titleholder address _____

Contractor Name W.R. EVANS / GAINESVILLE NEAR SIGNSAddress 618 S. MAIN STPhone nr. 352-376-2750City GAINESVILLEState FLZip code 32601Bonding Company KING INS. CO.Address 2321 NW 41 STAmt of Bond 45,000City GAINESVILLEState FLZip code 32605Lender Name N/A

Address _____

City _____

State _____

Zip code _____

Persons within the State of Florida designated by owner upon whom notices or other documents
 May be served as provided by Section 713.13(1)(a) 7., Florida Statutes: LAKE CITY FL

Name LARRY SISCO Address 173 NW HILLSBORO Zip code 32055In addition to himself, owner designates BRUCE MAGLEROf LAKE CITY FLto receive a copy of the lienor's notice as provided in
 Section 713.13(1)(b), Florida Statutes

Expiration date is 1 year from date of recording unless a different date is specified

Signature of Owner Larry SiscoPrinted Name LARRY SISCOSworn to and subscribed before me this 9th day of MAY A.D. 2006Notary Public Linda Evans

My commission expires _____

Personally known _____

produced ID _____

type of ID _____



Inst:2006011949 Date:05/16/2006 Time:15:38

7 DC, P. Dewitt Cason, Columbia County B:1083 P:2531

CONTRACTOR POWER OF ATTORNEY
KNOW ALL MEN BY THESE PRESENTS:

I William Ralph Griggs, of Gainesville Neon Signs, duly licensed by
Name of Contractor Name of Business

_____ or the State of Florida under number ET1000673 do hereby authorize the following

person(s) listed in column one below, and whose signature is in column two, to act in my stead by signing
for me on a permit for Columbia Bank, 1720 W. U.S. Hwy 90 LAKE CITY, FL
property owner(s) address

signature of agent James Mason printed name of agent JAMES MASON

I understand that I remain fully responsible as the contractor of record even though the application is signed
by my authorized agent. I am also responsible to provide required insurance and bond, and to meet all the
requirements of Columbia Co. FL ordinances or Florida Statutes related to contracting.

Contractor signature W.R. Griggs printed name of signature W. R. GRIGGS

State of Florida
County of Alachua

I hereby certify that on this day, before me, an officer duly authorized to administer oaths and take
acknowledgments, personally appeared W.R. Griggs, known to me to be the
person described herein who executed the foregoing instrument, who acknowledged before me that he
executed the same and that I relied upon the following form of identification Known personally;
an oath (was) (was not) taken.

Witness my hand & official seal this 10th day of May, 2006

Tina M. Wornick
Notary signature

Tina M. Wornick
Printed notary name

SEAL



Tina M. Wornick
Commission #DD192213
Expires: Mar 15, 2007
Bonded Thru
Atlantic Bonding Co., Inc.

AC# 1437077

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
ELECTRICAL CONTRACTORS LICENSING BOARD

SEQ# L04060700175

DATE	BATCH NUMBER	LICENSE NBR
06/07/2004	030694125	ET11000673

The SPECIALTY ELECTRICAL CONTRACTOR
Named below HAS REGISTERED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2006
AS A SIGN ELECTRICAL SPECIALIST

GRIGGS, WILLIAM RALPH
GAINESVILLE NEON & SIGNS INC
618 S MAIN STREET
GAINESVILLE FL 32601

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

COLUMBIA COUNTY BANK

BANKING ON A FIRST NAME BASIS

May 9, 2006

Gainesville Neon Signs
Attn: Jim Mason
618 S. Main St
Gainesville, FL 32601

Dear Mr. Mason,

This letter is your authorization from Columbia County Bank to secure the necessary permits to install new signage at our West Branch office located at 1720 West U.S. Highway 90, Lake City, FL. The parcel ID on this property is 36-3S-16-02626-008.

Should you need any additional information, please give me a call

Thank you



Larry Sisco
SVP/CFO

MAIN OFFICE

173 N.W. Hillsboro Street
Post Office Box 1609
Lake City, FL 32056-1609
(386) 752-5646
(386) 752-4747 Fax

SOUTH OFFICE

514 S.W. SR 47
Post Office Box 1609
Lake City, FL 32056-1609
(386) 755-2755
(386) 755-0072 Fax

WEST OFFICE

1720 W. U.S. Highway 90
Post Office Box 1609
Lake City, FL 32056-1609
(386) 752-3322
(386) 755-3788 Fax

TURNER ROAD OFFICE

4785 W. U.S. 90
Post Office Box 1609
Lake City, FL 32056-1609
(386) 719-8810
(386) 719-8860 Fax

ACORD, CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/16/2006

PRODUCER

King Insurance Agency
2321 NW 41st Street
Gainesville FL 32606
Daniel Whiddon Jr.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED

William R. Griggs State Lic #ET11000673
Gainesville Neon & Sign, Inc.
618 South Main Street
Gainesville FL 32601

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: WESTFIELD INSURANCE COMPANY

INSURER IS FCCI INSURANCE COMPANY

INSURER C

INSURER C:

INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTB DISBT		TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
A		GENERAL LIABILITY	TRA3547651	04/01/2006	04/01/2007	EACH OCCURRENCE	\$ 1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (EA accident)	\$ 100,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 5,000
		<input checked="" type="checkbox"/> PD DED \$500				PERSONAL & ADV INJURY	\$ 1,000,000
		GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE	\$ 1,000,000
		<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO- TECT <input type="checkbox"/> LOC				PRODUCTS - COMPOP AGG	\$ 1,000,000
A		AUTOMOBILE LIABILITY	TRA3547651	04/01/2006	04/01/2007	COMBINED SINGLE LIMIT (EA accident)	\$ 1,000,000
		<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
		<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
		<input checked="" type="checkbox"/> HIRED AUTOS				AUTO ONLY - EA ACCIDENT	\$
		<input checked="" type="checkbox"/> NON-OWNED AUTOS				OTHER THAN AUTO ONLY: EA ACC	\$
						AGG	\$
		GARAGE LIABILITY				EACH OCCURRENCE	\$
		<input type="checkbox"/> ANY AUTO				AGGREGATE	\$
							\$
							\$
		EXCESS/UMBRELLA LIABILITY					\$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE					\$
		<input type="checkbox"/> DEDUCTIBLE					\$
		RETENTION \$					\$
B		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	001-WC05A-09310	01/01/2006	01/01/2007	WC STATU- TORY LIMITS <input checked="" type="checkbox"/> OTH- FR	
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/ MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$ 500,000
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$ 500,000
		OTHER				E.L. DISEASE - POLICY LIMIT	\$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

FAX: 904-758-2160

CANCELLATION CLAUSE AMENDED TO 30 DAYS FOR WORKERS COMPENSATION

CERTIFICATE HOLDER

Columbia County Building Dept.
P.O. Drawer 1529

Lake City, FL 32056-1529

CANCELLATION

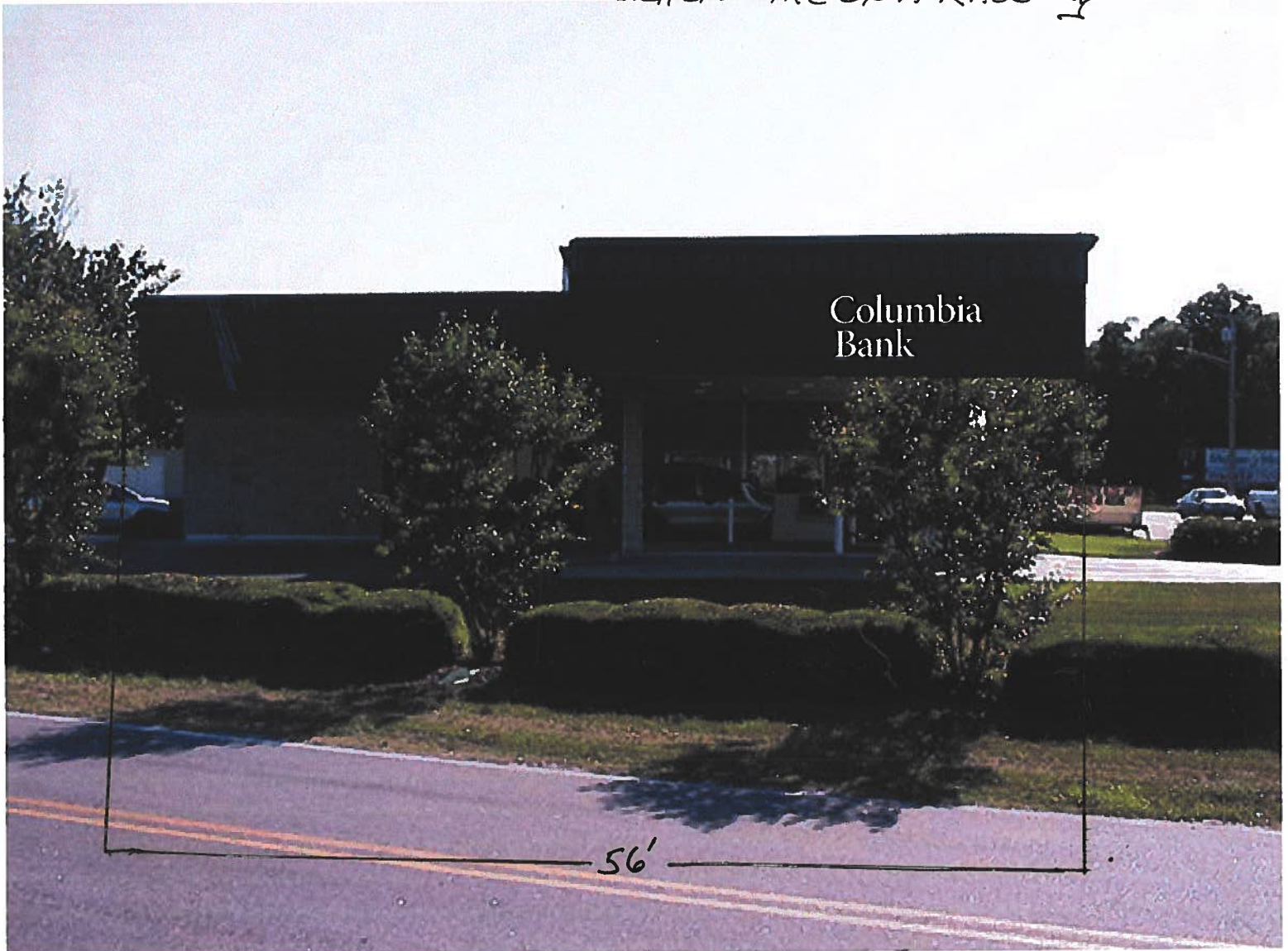
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

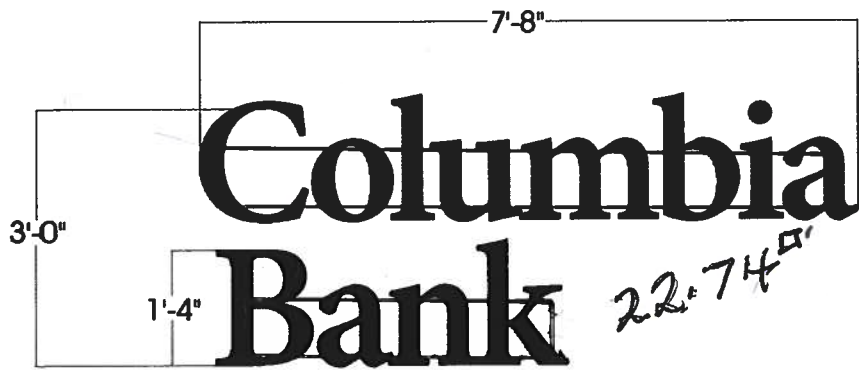
<MLB>

7'-8"
3'-0"
1'-4"
**Columbia
Bank** 22.74°

LETTERS ARE ON A RACEWAY



S.W. Sandlin Ave side



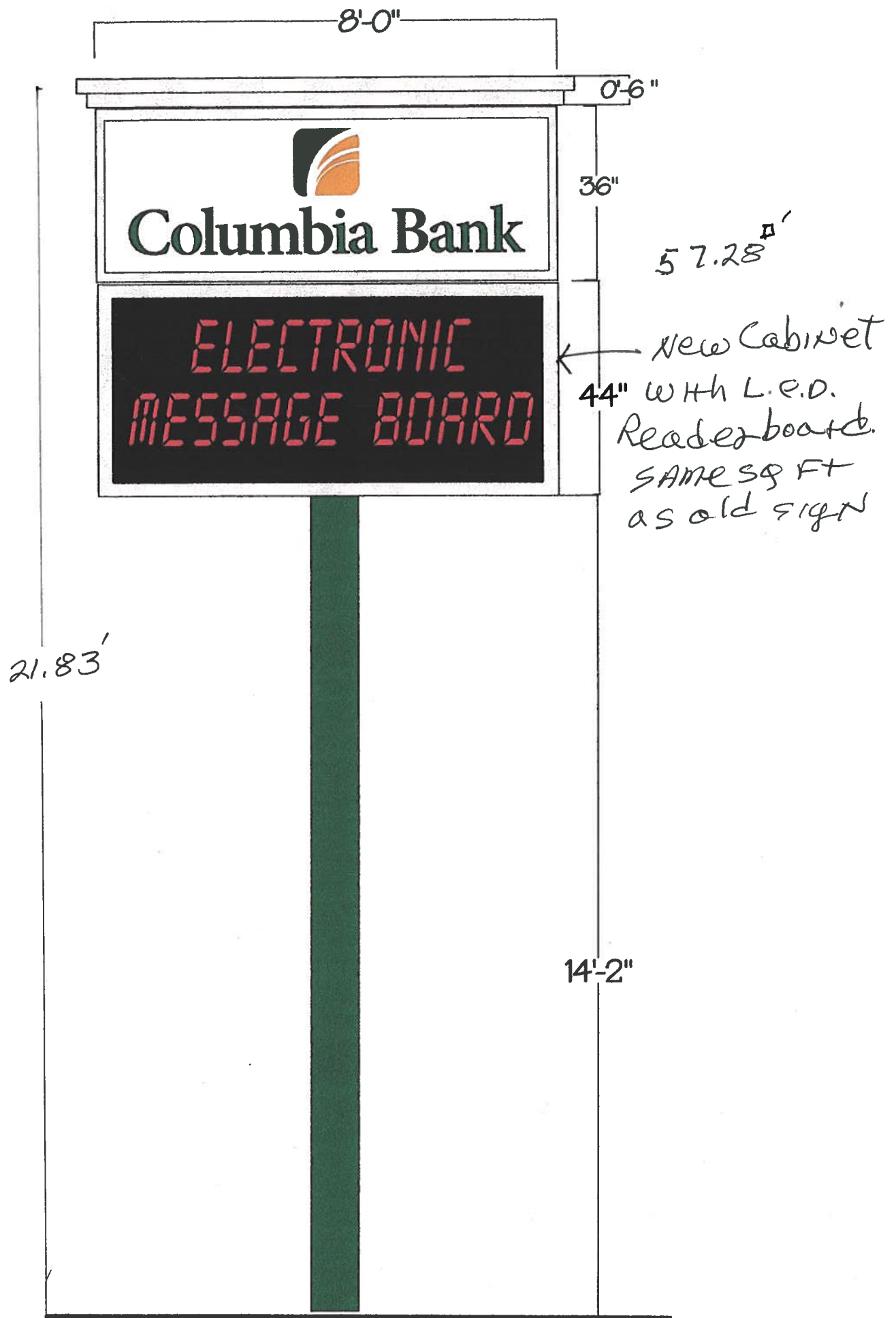
U.S. 90 side

Columbia
County
Bank
ATM BANKING

← EXISTING SIGNS ON U.S. 90
SIDE. REMOVE THIS 57.25'
SIGNS AND REPLACE IT
WITH NEW 57.25' SIGNS

21.83'

EXIT
ONLY
←



AC# 1437077

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
ELECTRICAL CONTRACTORS LICENSING BOARD

SEQ# L04060700175

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06/07/2004	030694125	ET11000673

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Under the provisions of Chapter 489 FS.

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AS A SIGN ELECTRICAL SPECIALIST

GRIGGS, WILLIAM RALPH
GAINESVILLE NEON & SIGNS INC
618 S MAIN STREET
GAINESVILLE FL 32601


JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

**WIND RESISTANCE ENGINEERING
CALCULATIONS FOR
WALL MOUNTED SIGN FOR
COLUMBIA BANK
1720 W. US HWY 90, LAKE CITY, FL**

**DESIGNED IN ACCORDANCE WITH
REQUIREMENTS OF 2004 FLORIDA BUILDING CODE,
USING ASCE 7-02 FOR 110 MPH WIND SPEED**


15 May 06
THOMAS SPUTO, PH.D., P.E.
PE 39142

**SPUTO AND LAMMERT ENGINEERING, LLC
STRUCTURAL ENGINEERS
10 SW 1st AVENUE, GAINESVILLE, FLORIDA 32601
(352) 378-0448
CA 6855**

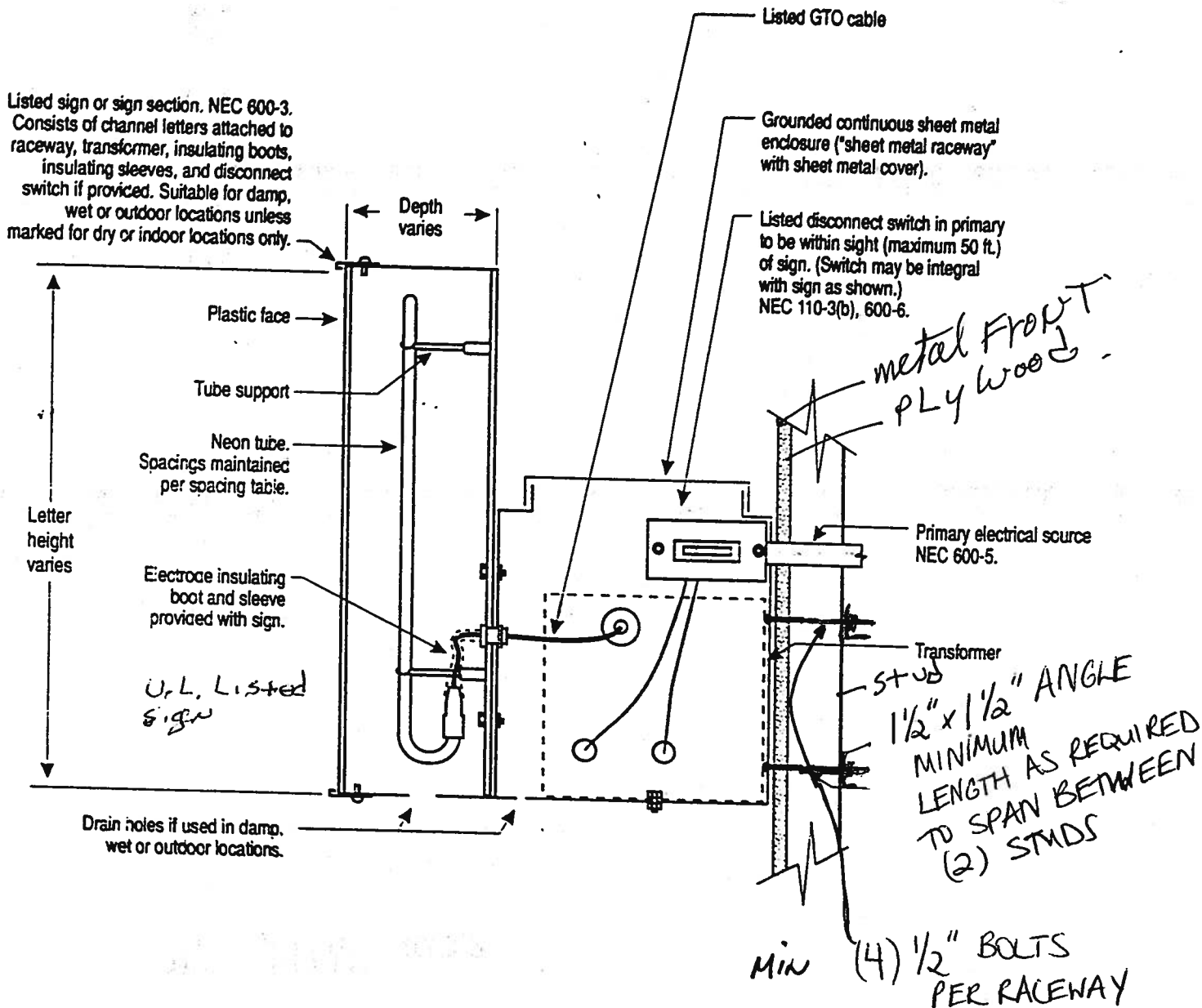
7'-8"

3'-0"

1'-4"

Columbia Bank

15 May 06



**Wall Mounted Sign for
Columbia Bank
1720 W. US HWY 90
Lake City, Florida**

This structure has been designed to resist 110 mph winds in accordance with ASCE 7-02, as required by the 2004 Florida Building Code
Thomas Sputo, Ph.D., P.E.
PE 39142

**SPUTO and LAMMERT
ENGINEERING, LLC
STRUCTURAL ENGINEERS
10 SW 1ST AVENUE
GAINESVILLE, FLORIDA 32601
CA 6855**

Local Information

Wind Dir.	Exposure
1	C
2	C
3	C
4	C

Basic Wind Speed: 110 mph

Topography: None

Components and Cladding Input

Component Description	Wall/Roof	Surface Label	Zone	Span(ft)	Width(ft)	Area(sqft)
Channel Letters	Wall	1	(All)	2.0	5.0	10.0

Components and Cladding Output

Component Description	Surface	Zone	z(ft)	q(psf)	GCp	GCpi	ExtPres(psf)	Net w/ +GCpi (psf)	Net w/ -GCpi (psf)
Channel Letters	1	4	18.0	23.2	0.90	0.18	20.9	16.7	25.1
			18.0	23.2	-0.99		-23.0	-27.1	-18.8
		5	18.0	23.2	0.90		20.9	16.7	25.1
			18.0	23.2	-1.26		-29.2	-33.4	-25.1

06SN012

Wall Mounted Sign

Wind Suction Pressure = 33.4 psf

$$ENA = \frac{1.33(7.67)}{1.33(4)} = \frac{10.2}{5.3} \text{ ft}^2 \text{ per Raceway}$$

$$\text{Suction} = \frac{10.2}{5.3} (33.4) = \frac{341}{177} \text{ lbs} = T$$

$$\text{Weight} = \frac{160}{80} \text{ lbs} = V \quad \text{Raceway} = 200 \text{ lbs}$$

(20 lbs/letter)

Allowable Tension Capacity = 4000 lbs

Allowable Shear Capacity = 2000 lbs

$$\frac{T}{T_{all}} + \frac{V}{V_{all}} \leq 1.0 \quad \text{Interaction Equation}$$

$$\frac{341}{4000} + \frac{360}{2000} = 0.18 < 1.0 \checkmark$$

$$\frac{177}{4000} + \frac{280}{2000} = 0.18 < 1.0$$

(4) 1/2" BOLTS MINIMUM

PER RACEWAY

* Top number is for "Columbia" 1'-4" x 7'-8"
 Bottom number is for "Rant" 1'-4" x 4"