

DATE 04/01/2005

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022972

APPLICANT STEVEN BOWIE PHONE 497-4107  
ADDRESS 5796 SW ICHETUCKNEE AVE FT. WHITE FL 32038  
OWNER STEVEN & CONNIE BOWIE PHONE 497-4107  
ADDRESS 5796 SW ICHETUCKNEE AVE LAKE CITY FL 32038  
CONTRACTOR OWNER BUILDER PHONE 497-4107  
LOCATION OF PROPERTY 47S, WEST ON 240, TR ON ICHETUCKNEE AVE, 4.7 MILES, ON  
THE RIGHT, 5796 ON CEDAR MAILBOX

TYPE DEVELOPMENT SFD,UTILITY ESTIMATED COST OF CONSTRUCTION 104200.00  
HEATED FLOOR AREA 2084.00 TOTAL AREA 2316.00 HEIGHT .00 STORIES 1  
FOUNDATION CONC WALLS FRAMED ROOF PITCH 4/12 FLOOR SLAB  
LAND USE & ZONING A-3 MAX. HEIGHT 18  
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00  
NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 01-6S-15-00498-004 SUBDIVISION  
LOT BLOCK PHASE UNIT TOTAL ACRES 7.30

Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor  
EXISTING 05-0113-N BK Y  
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD

MH TO BE REMOVED UPON COMPLETION OF SFD

Check # or Cash 3954

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

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

BUILDING PERMIT FEE \$ 525.00 CERTIFICATION FEE \$ 11.58 SURCHARGE FEE \$ 11.58  
MISC. FEES \$ .00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$  
FLOOD ZONE DEVELOPMENT FEE \$ CULVERT FEE \$ TOTAL FEE 598.16

INSPECTORS OFFICE CLERKS OFFICE

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

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

This Permit Must Be Prominently Posted on Premises During Construction

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

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



## Columbia County Building Permit Application

Revised 9-23-0

For Office Use Only Application # 0502-36 Date Received 2/1/05 By JW Permit # 22972  
Application Approved by - Zoning Official BLK Date 29.02.05 Plans Examiner OK/5714 Date 3-30-05  
Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3  
Comments \*WELL LIKE NEEDED

Applicants Name Steven F. Bowie - Connie Bowie Phone 4974107  
Address 5796 SW Ichetucknee Ave FW, FL 32038  
Owners Name same Phone \_\_\_\_\_  
911 Address 5796 SW Ichetucknee Ave FW FL 32038  
Contractors Name self Phone \_\_\_\_\_  
Address 5796 SW Ichetucknee Ave FW FL 32038  
Fee Simple Owner Name & Address \_\_\_\_\_  
Bonding Co. Name & Address \_\_\_\_\_  
Architect/Engineer Name & Address Mark Disosway LC FLA. TOWN DESIGN - INDIAN  
Mortgage Lenders Name & Address First Federal 2571 90W LC 7558434 x 3520  
Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Energy  
Property ID Number 00498 - 004 - C-1.6-15 Estimated Cost of Construction \$100,000  
Subdivision Name none Lot \_\_\_\_\_ Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase \_\_\_\_\_  
Driving Directions LC - (S) on 47 to Columbia City - (W) on 240 - (S)  
on Ichetucknee Ave - 4.7 miles - (W) side of road # 5796 - cedar  
mailbox  
Type of Construction traditional - wood frame Number of Existing Dwellings on Property temp. trailer  
Total Acreage 7.3 Lot Size \_\_\_\_\_ Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Driv  
Actual Distance of Structure from Property Lines - Front 448' Side 305' Side 56' Rear 210'  
Total Building Height 18' Number of Stories 1 Heated Floor Area 2084 Roof Pitch 4/12

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction.

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

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

Connie Bowie  
Owner/Builder or Agent (Including Contractor)

STATE OF FLORIDA  
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me

this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

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

Contractor Signature

Contractors License Number \_\_\_\_\_

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

NOTARY STAMP/SEAL

Notary Signature



Copy

**This Instrument Prepared by & return to:**

Name: **Cindy L. Jones**  
Address: **5926 SW ICHETUCKNEE AVE**  
**FT. WHITE, FL 32038**

Inst:2005002436 Date:02/02/2005 Time:13:45  
Doc Stamp-Deed : 0.70  
DC, P. DeWitt Cason, Columbia County B:1037 P:20

Parcel I.D. #: **00498-004**

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

**THIS WARRANTY DEED** Made the **1st** day of **January**, A.D. **2005**, by

**CINDY L. JONES**, a single person, hereinafter called the grantor, to

**STEVEN J. BOWIE** and **CONNIE S. BOWIE**, his wife, whose post office address is

**5796 SW ICHETUCKNEE AVE, FT. WHITE, FL 32038**, hereinafter called the grantees:

(Wherever used herein the terms "grantor" and "grantees" include all the parties to this instrument, singular and plural, the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

**Witnesseth:** That the grantor, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, does hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the grantees all that certain land situate in **Columbia County, State of FLORIDA**, viz:

COMMENCE AT THE SOUTHEAST CORNER OF THE NW ¼ OF THE SE ¼ OF SECTION 1, TOWNSHIP 6 SOUTH, RANGE 15 EAST, COLUMBIA COUNTY, FLORIDA, FOR A POINT OF REFERENCE; THENCE RUN N01°19'09"W, ALONG THE EAST LINE OF SAID NW ¼ OF THE SE ¼ OF SAID SECTION 1, A DISTANCE OF 596.63 FEET TO THE POINT OF BEGINNING; THENCE RUN S87°57'10"W, A DISTANCE OF 666.77 FEET TO THE EASTERLY MAINTAINED RIGHT-OF-WAY OF A COUNTY GRADED ROAD; THENCE RUN N23°54'09"W, ALONG THE EASTERLY EDGE OF SAID COUNTY GRADED ROAD, A DISTANCE OF 246.34 FEET; THENCE RUN N08°32'42"E, A DISTANCE OF 216.31 FEET; THENCE RUN N88°39'46"E, A DISTANCE OF 724.26 FEET TO THE EAST LINE OF SAID NW ¼ OF SE ¼; THENCE RUN S01°19'09"E, ALONG SAID EAST LINE, A DISTANCE OF 432.31 FEET TO THE POINT OF BEGINNING.

**Together** with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.


**To Have and to Hold** the same in fee simple forever.

**And** the grantor hereby covenants with said grantees that she is lawfully seized of said land in fee simple; that she has good right and lawful authority to sell and convey said land, and hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever, and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2004.

**In Witness Whereof**, the said grantor has signed and sealed these presents, the day and year first above written.

Signed, sealed and delivered in the presence of:

Beverly B. Scott  
Witness Signature  
Beverly B. Scott  
Printed Name

 L.S.  
**CINDY L. JONES**  
Address:  
**5926 SW ICHETUCKNEE AVE, FT. WHITE,**  
**FL 32038**



STATE OF FLORIDA  
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 05-0113W

PART II - SITE PLAN

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

See copy of engineer drawing  
210

7.3 acres



1 of 7.3

See engineer drawing

Notes:

Site Plan submitted by: Genie Burre Barbara Richards

Signature

Title

Plan Approved X

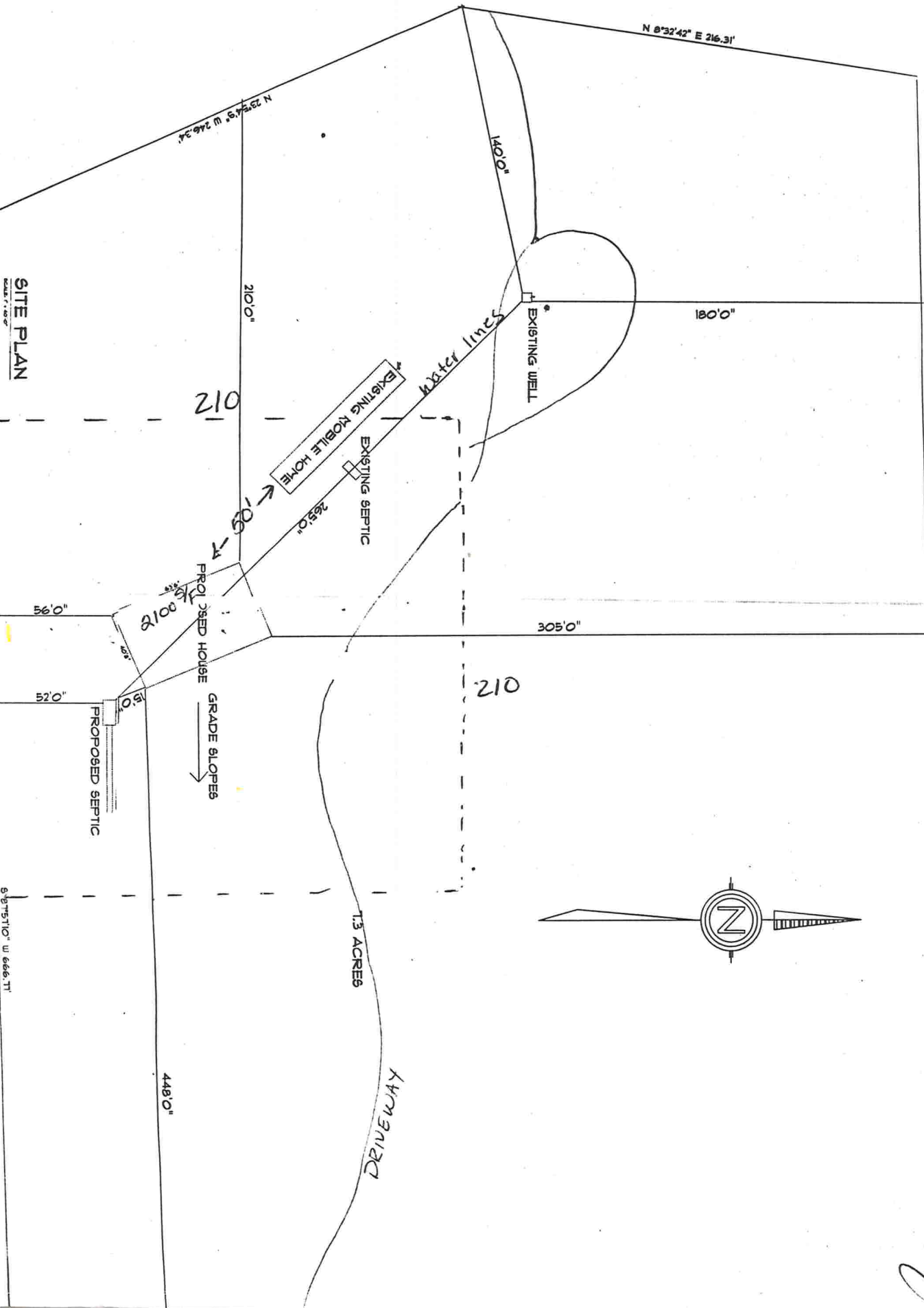
Not Approved

Date 2/2/05

By Salli Grady - ES - Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



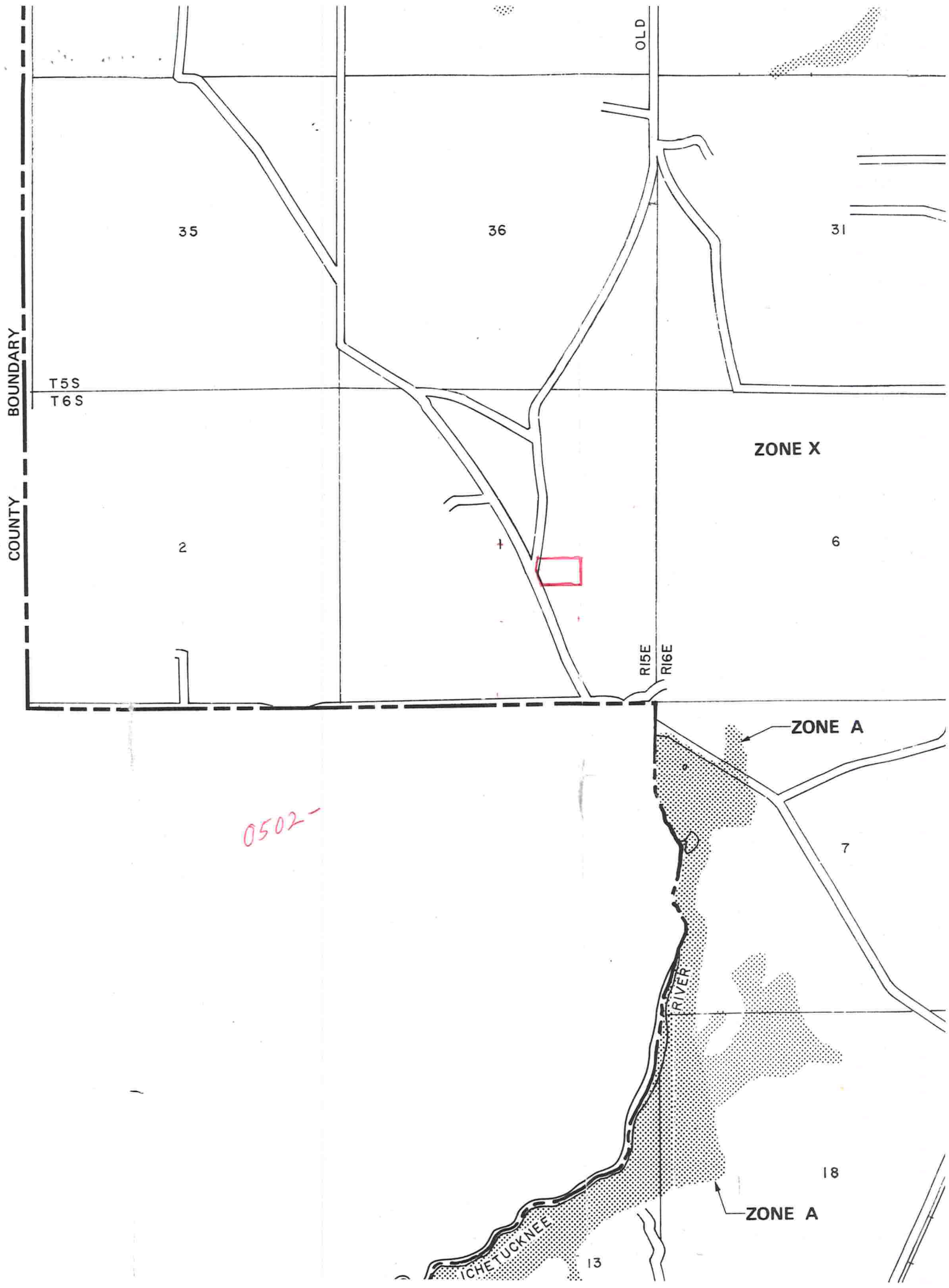


SITE PLAN

*Brown*

nnie Bowie 5796 SW Ichetucknee Ave FW 32038







## DISCLOSURE STATEMENT

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

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

#### TYPE OF CONSTRUCTION

- ☒ Single Family Dwelling  
☐ Farm Outbuilding  
☒ New Construction

- ☐ Two-Family Residence  
☐ Other \_\_\_\_\_

☐ Addition, Alteration, Modification or other Improvement

#### NEW CONSTRUCTION OR IMPROVEMENT

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

Steven F. Bowie  
Signature Connie Bowie

2/10/05  
Date

#### FOR BUILDING USE ONLY

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

Date 2/1/05 Building Official/Representative Danica Kenna



## COLUMBIA COUNTY BUILDING DEPARTMENT

### RESIDENTIAL MINIMUM PLAN REQUIREMENTS AND CHECKLIST FOR FLORIDA BUILDING CODE 2001

#### ONE (1) AND TWO (2) FAMILY DWELLINGS

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

EFFECTIVE MARCH 1, 2002

ALL BUILDING PLANS MUST INDICATE THE FOLLOWING ITEMS AND INDICATE COMPLIANCE WITH CHAPTER 1606 OF THE FLORIDA BUILDING CODE 2001 BY PROVIDING CALCULATIONS AND DETAILS THAT HAVE THE SEAL AND SIGNATURE OF A CERTIFIED ARCHITECT OR ENGINEER REGISTERED IN THE STATE OF FLORIDA, OR ALTERNATE METHODOLOGIES, APPROVED BY THE STATE OF FLORIDA BUILDING COMMISSION FOR ONE-AND-TWO FAMILY DWELLINGS. FOR DESIGN PURPOSES THE FOLLOWING BASIC WIND SPEED AS PER FIGURE 1606 SHALL BE USED.

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

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

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

#### GENERAL REQUIREMENTS: Two (2) complete sets of plans containing the following:

Applicant	Plans Examiner	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	All drawings must be clear, concise and drawn to scale ("Optional " details that are not used shall be marked void or crossed off). Square footage of different areas shall be shown on plans.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Designers name and signature on document (FBC 104.2.1). If licensed <i>JONATHAN DEAN</i> architect or engineer, official seal shall be affixed. <i>MARK DISOSWAY PE 53915</i>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Site Plan including:</u> <input checked="" type="checkbox"/> a) Dimensions of lot <input checked="" type="checkbox"/> b) Dimensions of building set backs <input checked="" type="checkbox"/> c) Location of all other buildings on lot, well and septic tank if applicable, and all utility easements. <input checked="" type="checkbox"/> d) Provide a full legal description of property.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Wind-load Engineering Summary, calculations and any details required</u> <input checked="" type="checkbox"/> a) Plans or specifications must state compliance with FBC Section 1606 <i>CERTIFICATION BY</i> <input checked="" type="checkbox"/> b) The following information must be shown as per section 1606.1.7 FBC <i>MARK DISOSWAY PE 53915</i> <input checked="" type="checkbox"/> a. Basic wind speed (MPH) <i>110</i> <input checked="" type="checkbox"/> b. Wind importance factor (I) and building category <i>I</i> <input checked="" type="checkbox"/> c. Wind exposure - if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated <i>B</i> <input checked="" type="checkbox"/> d. The applicable internal pressure coefficient <input checked="" type="checkbox"/> e. Components and Cladding. The design wind pressure in terms of psf (kN/m <sup>2</sup> ), to be used for the design of exterior component and cladding materials not specifically designed by the registered design professional
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Elevations including:</u> <input checked="" type="checkbox"/> a) All sides <input checked="" type="checkbox"/> b) Roof pitch <i>4/12</i> <input checked="" type="checkbox"/> c) Overhang dimensions and detail with attic ventilation <i>24" MAX</i> <input checked="" type="checkbox"/> d) Location, size and height above roof of chimneys <input checked="" type="checkbox"/> e) Location and size of skylights <input checked="" type="checkbox"/> f) Building height <i>13' + FOUNDATION</i> <input checked="" type="checkbox"/> g) Number of stories <i>1</i>



**Floor Plan including:**

- a) Rooms labeled and dimensioned
- b) Shear walls *NO GARAGEDoor*
- c) Windows and doors (including garage doors) showing size, mfg., approval listing and attachment specs. (FBC 1707) and safety glazing where needed (egress windows in bedrooms to be shown) *TEMPERED GLASS BATH ROOMS*
- d) Fireplaces (gas appliance) (vented or non-vented) or wood burning with hearth
- e) Stairs with dimensions (width, tread and riser) and details of guardrails and handrails
- f) Must show and identify accessibility requirements (accessible bathroom) *MASTER BATH*

**Foundation Plan including:**

- a) Location of all load-bearing wall with required footings indicated as standard Or monolithic and dimensions and reinforcing
- b) All posts and/or column footing including size and reinforcing
- c) Any special support required by soil analysis such as piling
- d) Location of any vertical steel

**Roof System:**

- a) Truss package including: *ALPINE* *PE 58752*
  - 1. Truss layout and truss details signed and sealed by Fl. Pro. Eng. *Denise Rutledge*
  - 2. Roof assembly (FBC 104.2.1 Roofing system, materials, manufacturer, fastening requirements and product evaluation with wind resistance rating)
- b) Conventional Framing Layout including:
  - 1. Rafter size, species and spacing
  - 2. Attachment to wall and uplift
  - 3. Ridge beam sized and valley framing and support details
  - 4. Roof assembly (FBC 104.2.1 Roofing systems, materials, manufacturer, fastening requirements and product evaluation with wind resistance rating)

**Wall Sections including:**

- a) Masonry wall
  - 1. All materials making up wall
  - 2. Block size and mortar type with size and spacing of reinforcement
  - 3. Lintel, tie-beam sizes and reinforcement
  - 4. Gable ends with rake beams showing reinforcement or gable truss and wall bracing details
  - 5. All required connectors with uplift rating and required number and size of fasteners for continuous tie from roof to foundation
  - 6. Roof assembly shown here or on roof system detail (FBC 104.2.1 Roofing system, materials, manufacturer, fastening requirements and product evaluation with resistance rating)
  - 7. Fire resistant construction (if required)
  - 8. Fireproofing requirements
  - 9. Shoe type of termite treatment (termicide or alternative method)
  - 10. Slab on grade
    - a. Vapor retardant (6mil. Polyethylene with joints lapped 6 inches and sealed)
    - b. Must show control joints, synthetic fiber reinforcement or Welded fire fabric reinforcement and supports
  - 11. Indicate where pressure treated wood will be placed
  - 12. Provide insulation R value for the following:
    - a. Attic space
    - b. Exterior wall cavity
    - c. Crawl space (if applicable)

**b) Wood frame wall**

- ✓ 1. All materials making up wall
- ✓ 2. Size and species of studs *2x6*
- ✓ 3. Sheathing size, type and nailing schedule *7/16 OSB*
- ✓ 4. Headers sized *see sheet S-1-W.13*
- ✓ 5. Gable end showing balloon framing detail or gable truss and wall hinge bracing detail *see sheet S-1-W.10*
- ✓ 6. All required fasteners for continuous tie from roof to foundation (truss anchors, straps, anchor bolts and washers)
- ✓ 7. Roof assembly shown here or on roof system detail (FBC104.2.1 Roofing system, materials, manufacturer, fastening requirements and product evaluation with wind resistance rating)
- ~~8. Fire resistant construction (if applicable)~~
9. Fireproofing requirements
- ✓ 10. Show type of termite treatment (termicide or alternative method)
- ✓ 11. Slab on grade
  - ✓ a. Vapor retardant (6Mil. Polyethylene with joints lapped 6 inches and sealed)
  - ✓ b. Must show control joints, synthetic fiber reinforcement or welded wire fabric reinforcement and supports
- ✓ 12. Indicate where pressure treated wood will be placed
- ✓ 13. Provide insulation R value for the following:
  - a. Attic space *R-30*
  - b. Exterior wall cavity *R-19*
  - ~~c. Crawl space (if applicable)~~

c) Metal frame wall and roof (designed, signed and sealed by Florida Prof. Engineer or Architect)

**Floor Framing System:**

- a) Floor truss package including layout and details, signed and sealed by Florida Registered Professional Engineer
- b) Floor joist size and spacing
- c) Girder size and spacing
- d) Attachment of joist to girder
- e) Wind load requirements where applicable

**Plumbing Fixture layout**

**Electrical layout including:**

- a) Switches, outlets/receptacles, lighting and all required GFCI outlets identified *BATH, KIT 3 exterior*
- b) Ceiling fans *7*
- c) Smoke detectors *6*
- d) Service panel and sub-panel size and location(s) *200 utility room*
- e) Meter location with type of service entrance (overhead or underground)
- f) Appliances and HVAC equipment
- g) Arc Fault Circuits (AFCI) in bedrooms *NOT NOTED ON ELECTRICAL PLANS*

**HVAC information**

- a) Manual J sizing equipment or equivalent computation
- b) Exhaust fans in bathroom *NO FAN SHOWN IN MASTER BATH ROOM*

**Energy Calculations** (dimensions shall match plans)

**Gas System** Type (LP or Natural) Location and BTU demand of equipment

**Disclosure Statement for Owner Builders**

\*\*\***Notice Of Commencement Required Before Any Inspections Will Be Done**

**Private Potable Water**

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

*1997 Lynceville Drilling  
1 horse pump  
82gal galvanized tank*

*NO*



## **THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS**

1. **Building Permit Application:** A current Building Permit Application form is to be completed and submitted for all residential projects.
2. **Parcel Number:** The parcel number (Tax ID number) from the Property Appraiser (386) 758-1084 is required. A copy of property deed is also requested.
3. **Environmental Health Permit or Sewer Tap Approval:** A copy of the Environmental Health permit, existing septic approval or sewer tap approval is required before a building permit can be issued.  
(386) 758-1058 ( Toilet facilities shall be provided for construction workers )
4. **City Approval:** If the project is to be located within the city limits of the Town of Fort White, prior approval is required. The Town of Fort White approval letter is required to be submitted by the owner or contractor to this office when applying for a Building Permit. (386) 497-2321
5. **Flood Information:** All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting application to this office. Any project located within a flood zone where the base flood elevation (100 year flood) has been established shall meet the requirements of Section 8.8 of the Columbia County Land Development Regulations. Any project located within a flood zone where the base flood elevation has not been established (Zone A) shall meet the requirements of Section 8.7 of the Columbia County Land Development Regulations. **CERTIFIED FINISHED FLOOR ELEVATIONS WILL BE REQUIRED ON ANY PROJECT WHERE THE BASE FLOOD ELEVATION (100 YEAR FLOOD) HAS BEEN ESTABLISHED.**  
A development permit will also be required. Development permit cost is \$50.00
6. **Driveway Connection:** If the property does not have an existing access to a public road, then an application for a culvert permit (\$25.00) must be made. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver (\$50.00). All culvert waivers are sent to the Columbia County Public Works Department for approval or denial.
7. **911 Address:** If the project is located in an area where the 911 address has been issued, then the proper paperwork from the 911 Addressing Department must be submitted. (386) 752-8787

**ALL REQUIRED INFORMATION IS TO BE SUBMITTED FOR REVIEW. YOU WILL BE NOTIFIED WHEN YOUR APPLICATION AND PLANS ARE APPROVED AND READY TO PERMIT. PLEASE DO NOT EXPECT OR REQUEST THAT PERMIT APPLICATIONS BE REVIEWED OR APPROVED WHILE YOU ARE HERE – TIME WILL NOT ALLOW THIS –PLEASE DO NOT ASK**

# **NOTICE:**

## **ADDRESSES BY APPOINTMENT ONLY!**

**TO OBTAIN A 9-1-1 ADDRESS THE REQUESTER MUST CONTACT THE COLUMBIA COUNTY 9-1-1 ADDRESSING DEPARTMENT AT (386) 752-8787 FOR AN APPOINTMENT TIME AND DATE:**

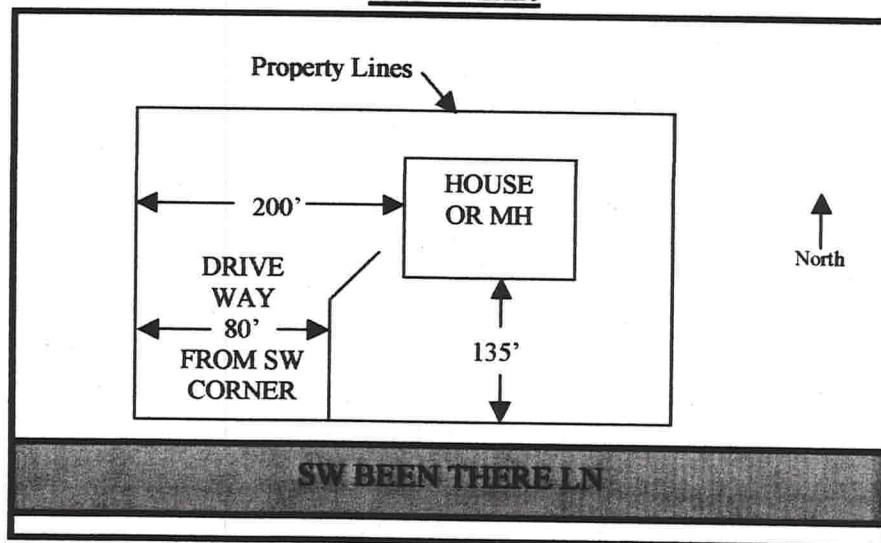
## **YOU CAN NOT OBTAIN A NEW ADDRESS OVER THE TELEPHONE. MUST MAKE AN APPOINTMENT!**

**THE ADDRESSING DEPARTMENT IS LOCATED AT 263 NW LAKE CITY AVENUE (OFF OF WEST U.S. HIGHWAY 90 WEST OF INTERSTATE 75 AT THE COLUMBIA COUNTY EMERGENCY OPERATIONS CENTER).**

### **THE REQUESTER WILL NEED THE FOLLOWING:**

1. THE PARCEL OR TAX ID NUMBER (SAMPLE: "25-4S-17-12345-123" OR "R12345-123) FOR THE PROPERTY.
2. A PLAT, PLAN, SITE PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
  - a. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
  - b. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
  - c. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

### **SAMPLE:**



**NOTE: 5 TO 7 WORKING DAYS MAY BE REQUIRED IF ADDRESSING DEPARTMENT NEEDS TO CONDUCT AN ON SITE SURVEY.**



## LYNCH WELL DRILLING, INC.

175 SW Young Pl

LAKE CITY, FL 32025

PHONE (386) 752-6677

FAX (386) 752-1477

RESIDENTIAL WATER WELL BUILDING PERMIT INFORMATIONBuilding Permit # 0502-36 Owners Name Carnie BowieWell Depth 80 Ft. Casing Depth 58 Ft. Water Level 26 Ft.Casing Size 4 PVC \_\_\_\_\_ Steel XPump Installation: Submersible X Deep Well Jet \_\_\_\_\_ Shallow Well \_\_\_\_\_Pump Make Houls Pump Model # 20SB10-22 Hp 1System Pressure (PSI) \_\_\_\_\_ On 20 Off 40 Avg. Pressure 40  
(PSI)Pumping System GPM at average pressure and pumping level 20 (GPM)Tank Installation: Precharged (Baldder) \_\_\_\_\_ Atmospheric (Galvanized) XMake Galvanized Model \_\_\_\_\_ Size 82

Tank Draw-down per cycle at system pressure \_\_\_\_\_ Gallons

I HEREBY CERTIFY THAT THIS WATER WELL SYSTEM HAS BEEN  
INSTALLED AS PER ABOVE INFORMATION.Linda Newcomb  
SignatureLinda Newcomb  
Print Name1274 or 2609  
License Number12-3-97  
Date well was drilled  
in 1997.

FAX COVER SHEET

LYNCH WELL DRILLING, INC.  
173 SW TUSTENUGGEE AVE.  
LAKE CITY, FL 32025  
(386) 752-6677  
(386) 752-1477 fax  
lynchwel@bellsouth.net

<b>SEND TO</b>	<b>From</b>
Building & Zoning	Lynch well drilling
Attention Joe	Date 2-11-05
Office location Lake City	Office location Lake City
Fax number 754-7088	Phone number 386-752-6677

☐ Urgent    ☐ Reply ASAP    ☐ Please comment    ☐ Please review    ☒ For your information

Total pages, including cover: 2

COMMENTS

Information on Connie Bower's well



Compliance with Method B Chapter 6 of the Florida Energy Efficiency Code may be demonstrated by the use of Form 600B for single and multifamily residences of 3 stories or less in height, and additions to existing residential buildings. To comply, a building must meet or exceed all of the energy efficiency prescriptives in any one of the prescriptive component packages and comply with the prescriptive measures listed in Table 6B-1 of this form. An alternative method is provided for additions of 600 square feet or less by use of Form 600C. If a building does not comply with this method, it may still comply under other sections in Chapter 6 of the Code.

PROJECT NAME: <u>Steve + Connie Bowie</u>	BUILDER: <u>owner</u>
AND ADDRESS: <u>5796 SW Tatchell Ave</u>	PERMITTING OFFICE:
<u>Fort White, FL 32038</u>	CLIMATE ZONE: 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>
OWNER: <u>Steve + Connie Bowie</u>	PERMIT NO.: <u>22972</u>
	JURISDICTION NO.: <u>221000</u>

## GENERAL DIRECTIONS

1. New construction including additions which incorporates any of the following features cannot comply using this method: steel stud walls, single assembly roof/ceiling construction, or skylights or other non-vertical roof glass.
2. Choose one of the component packages "A" through "E" from Table 6B-1 by which you intend to comply with the Code. Circle the column of the package you have chosen.
3. Fill in all the applicable spaces of the "To Be Installed" column on Table 6B-1 with the information requested. All "To Be Installed" values must be equal to or more efficient than the required levels.
4. Complete page 1 based on the "To Be Installed" column information.
5. Read "Minimum Requirements for All Packages", Table 6B-2 and check each box to indicate your intent to comply with all applicable items.
6. Read, sign and date the "Prepared By" certification statement at the bottom of page 1. The owner or owner's agent must also sign and date the form.

Please Print

CK

1. Compliance package chosen (A-F)
2. New construction or addition
3. Single family detached or Multifamily attached
4. If Multifamily—No. of units covered by this submission
5. Is this a worst case? (yes / no)
6. Conditioned floor area (sq. ft.)
7. Predominant eave overhang (ft.)
8. Glass type and area :
  - a. Clear glass
  - b. Tint, film or solar screen
9. Percentage of glass to floor area
10. Floor type, area or perimeter, and insulation:
  - a. Slab on grade (R-value)
  - b. Wood, raised (R-value)
  - c. Wood, common (R-value)
  - d. Concrete, raised (R-value)
  - e. Concrete, common (R-value)
11. Wall type, area and insulation:
  - a. Exterior: 1. Masonry (Insulation R-value)  
2. Wood frame (Insulation R-value)
  - b. Adjacent: 1. Masonry (Insulation R-value)  
2. Wood frame (Insulation R-value)
12. Ceiling type, area and insulation:
  - a. Under attic (Insulation R-value)
  - b. Single assembly (Insulation R-value)
13. Air Distribution System: Duct insulation, location  
Test report (attach if required)
14. Cooling system  
(Types: central, room unit, package terminal A.C., gas, none)
15. Heating system:  
(Types: heat pump, elec. strip, nat. gas, L.P. gas, gas h.p., room or PTAC, none)
16. Hot water system:  
(Types: elec., nat. gas, L.P. gas, solar, heat rec., ded. heat pump, other, none)

1. <u>E</u>	
2. <u>NEW</u>	
3. <u>SINGLE</u>	
4. <u>N/A</u>	
5. _____	
6. <u>2084</u>	
7. <u>2</u>	
Single Pane	Double Pane
8a. _____ sq. ft.	_____ sq. ft.
8b. _____ sq. ft.	<u>359</u> sq. ft.
9. _____ %	
10a. R= <u>0</u> _____ lin. ft.	
10b. R= _____ sq. ft.	
10c. R= _____ sq. ft.	
10d. R= _____ sq. ft.	
10e. R= _____ sq. ft.	
11a-1 R= _____ sq. ft.	
11a-2 R= <u>19</u> sq. ft.	
11b-1 R= _____ sq. ft.	
11b-2 R= <u>19</u> sq. ft.	
12a. R= <u>30</u> sq. ft.	
12b. R= _____ sq. ft.	
13. R= _____	
14a. Type: _____	
14b. SEER/EER: <u>14 TRANE</u>	
14c. Capacity: <u>70 SHR 3.5ton</u>	
15a. Type: _____	
15b. HSPF/COP/AFUE: _____	
15c. Capacity: <u>8.25 HSPF</u>	
16a. Type: <u>Electric</u>	
16b. EF: <u>above requirement</u>	

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

PREPARED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

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

OWNER AGENT: \_\_\_\_\_

DATE: \_\_\_\_\_

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

BUILDING OFFICIAL: \_\_\_\_\_

DATE: \_\_\_\_\_

Saxed 2/22/05  
11am

Attention: Joe

From: Connie Bowie  
5796 SW Ichetucknee Ave  
F.W, FL 32038  
4974107 home  
365 2975 cell

Attached is F&E Code

Is there anything else you  
need?

I have not made a choice  
as far as the water heater but I  
am aware of the min. requirements.

Thank you  
Connie Bowie



Compliance with Method B Chapter 6 of the Florida Energy Efficiency Code may be demonstrated by the use of Form 600B for single and multifamily residences of 3 stories or less in height, and additions to existing residential buildings. To comply, a building must meet or exceed all of the energy efficiency prescriptives in any one of the prescriptive component packages and comply with the prescriptive measures listed in Table 6B-1 of this form. An alternative method is provided for additions of 600 square feet or less by use of Form 600C. If a building does not comply with this method, it may still comply under other sections in Chapter 6 of the Code.

PROJECT NAME: AND ADDRESS:		BUILDER:	CLIMATE ZONE: 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>
		PERMITTING OFFICE:	
OWNER:		PERMIT NO. <input type="text"/>	JURISDICTION NO.: <input type="text"/>

## GENERAL DIRECTIONS

1. New construction including additions which incorporates any of the following features cannot comply using this method: steel stud walls, single assembly roof/ceiling construction, or skylights or other non-vertical roof glass.
2. Choose one of the component packages "A" through "E" from Table 6B-1 by which you intend to comply with the Code. Circle the column of the package you have chosen.
3. Fill in all the applicable spaces of the "To Be Installed" column on Table 6B-1 with the information requested. All "To Be Installed" values must be equal to or more efficient than the required levels.
4. Complete page 1 based on the "To Be Installed" column information.
5. Read "Minimum Requirements for All Packages", Table 6B-2 and check each box to indicate your intent to comply with all applicable items.
6. Read, sign and date the "Prepared By" certification statement at the bottom of page 1. The owner or owner's agent must also sign and date the form.

Please Print

CK

1. Compliance package chosen (A-F)
2. New construction or addition
3. Single family detached or Multifamily attached
4. If Multifamily—No. of units covered by this submission
5. Is this a worst case? (yes / no)
6. Conditioned floor area (sq. ft.)
7. Predominant eave overhang (ft.)
8. Glass type and area :
  - a. Clear glass
  - b. Tint, film or solar screen
9. Percentage of glass to floor area
10. Floor type, area or perimeter, and insulation:
  - a. Slab on grade (R-value)
  - b. Wood, raised (R-value)
  - c. Wood, common (R-value)
  - d. Concrete, raised (R-value)
  - e. Concrete, common (R-value)
11. Wall type, area and insulation:
  - a. Exterior: 1. Masonry (Insulation R-value)  
2. Wood frame (Insulation R-value)
  - b. Adjacent: 1. Masonry (Insulation R-value)  
2. Wood frame (Insulation R-value)
12. Ceiling type, area and insulation:
  - a. Under attic (Insulation R-value)
  - b. Single assembly (Insulation R-value)
13. Air Distribution System: Duct insulation, location  
Test report (attach if required)
14. Cooling system  
(Types: central, room unit, package terminal A.C., gas, none)
15. Heating system:  
(Types: heat pump, elec. strip, nat. gas, L.P. gas, gas h.p., room or PTAC, none)
16. Hot water system:  
(Types: elec., nat. gas, L.P. gas, solar, heat rec., ded. heat pump, other, none)

1.	F	
2.	NEW	
3.	SINGLE	
4.	N/A	
5.		
6.	2084	
7.	2	
	Single Pane	Double Pane
8a.		sq. ft.
8b.		sq. ft.
9.	.173	%
10a.	R= 0	lin. ft.
10b.	R=	sq. ft.
10c.	R=	sq. ft.
10d.	R=	sq. ft.
10e.	R=	sq. ft.
11a-1	R=	sq. ft.
11a-2	R= 19	sq. ft.
11b-1	R=	sq. ft.
11b-2	R= 19	sq. ft.
12a.	R= 30	sq. ft.
12b.	R=	sq. ft.
13.	R=	
14a.	Type:	
14b.	SEER/EER: 14 Trane	
14c.	Capacity: .76 SHR 3.5hp	
15a.	Type:	
15b.	HSPF/COP/AFUE:	
15c.	Capacity: 8.25 HSPF	
16a.	Type: Electric	
16b.	EF:	

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

PREPARED BY:

DATE:

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

OWNER AGENT:

DATE:

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

BUILDING OFFICIAL:

DATE:

# WINDLOAD ENGINEERING

"EVERYTHING YOU NEED FOR YOUR BUILDING PERMIT"

Mark Disosway P.E.

POB 868, Lake City, FL 32056    Phone: (386) 754-5419

Fax: (386) 754-6749    Email: [windloadengineer@bellsouth.net](mailto:windloadengineer@bellsouth.net)

Location: 5796 SW Ichetucknee Rd., Ft. White, FL 32038

Bowie Residence

Builder: Jon Deans

Designer: Jon Deans

Approved: FLEP#53915

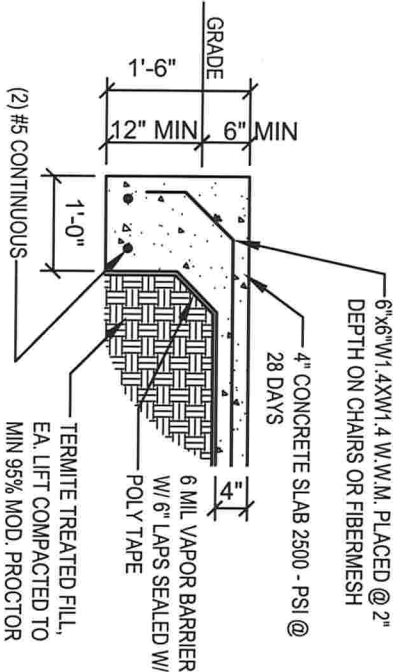
Revisions:

Sheet S-1 of 1 Sheet

Windload Engineering

Job # 501171

*Mark Disosway*  
27 APR 05  
17 Jan 05



## F6 - MONOLITHIC FOOTING

SCALE: 1/2"=1'-0" REV-22-AUG-03



THIS INSTRUMENT PREPARED BY  
AND RETURN TO:  
TITLE OFFICES, LLC  
1089 SW MAIN BLVD.  
LAKE CITY, FLORIDA 32025

Inst: 2005008879 Date: 04/18/2005 Time: 14:23  
~~XXXX~~ DC, P. DeWitt Cason, Columbia County B: 1043 P: 1803

Parcel I.D. #: 00498-001  
Owner(s) SSH's: 062482639

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

## NOTICE OF COMMENCEMENT

STATE OF FLORIDA  
COUNTY OF COLUMBIA

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713.13, Florida Statutes, the following information is provided in this Notice of Commencement. This Notice shall be void and of no force and effect if construction is not commenced within ninety (90) days after recordation.

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

**5796 SW ICHETUCKNEE AVE., FT. WHITE, FLORIDA 32038**

COMMENCE AT THE SOUTHEAST CORNER OF THE NW ¼ OF THE SE ¼ OF SECTION 1, TOWNSHIP 6 SOUTH, RANGE 15 EAST, COLUMBIA COUNTY, FLORIDA, FOR A POINT OF REFERENCE; THENCE RUN N 01°19'09" W, ALONG THE EAST LINE OF SAID NW ¼ OF THE SE ¼ OF SAID SECTION 1, A DISTANCE OF 596.63 FEET TO THE POINT OF BEGINNING; THENCE RUN S 87°57'10" W, A DISTANCE OF 666.77 FEET TO THE EASTERLY MAINTAINED RIGHT-OF-WAY OF A COUNTY GRADED ROAD; THENCE RUN N 23°54'09" W, ALONG THE EASTERLY EDGE OF SAID COUNTY GRADED ROAD, A DISTANCE OF 246.34 FEET; THENCE RUN N 08°32'42" E, A DISTANCE OF 216.31 FEET; THENCE RUN N 88°39'46" E, A DISTANCE OF 724.26 FEET TO THE EAST LINE OF SAID NW ¼ OF SE ¼; THENCE RUN S 01°19'09" E, ALONG SAID EAST LINE, A DISTANCE OF 432.31 FEET TO THE POINT OF BEGINNING.

2. General description of improvement: construction of single family dwelling

3. Owner information:

- a. Name and address:

**STEVEN J. BOWIE**

**5796 SW ICHETUCKNEE AVE., FT. WHITE, FLORIDA**

**32038**

- b. Interest in property: Fee Simple

- c. Name and Address of Fee Simple Titleholder (if other than owner):

4. Contractor: (Name and Address)

**STEVEN J. BOWIE**

**5796 SW ICHETUCKNEE AVE., FT. WHITE, FLORIDA 32038**

Telephone Number: **(386) 497-4107**

5. Surety (if any):

- a. Name and Address:

Telephone Number: \_\_\_\_\_

- b. Amount of Bond \$ \_\_\_\_\_

6. Lender: (Name and Address)

**FIRST FEDERAL SAVINGS BANK OF FLORIDA**

**4705 WEST U.S. HWY 90, P.O. BOX 2029, LAKE CITY, FL 32056**

Telephone Number: **755-0600**

7. Persons within the State of Florida designated by Owner upon whom notice or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes: (Name and Address)  
N/A

8. In addition to himself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes: (Name and Address) **PAULA HACKER**

**FIRST FEDERAL SAVINGS BANK OF FLORIDA**

**4705 WEST U.S. HWY 90, P.O. BOX 2029, LAKE CITY, FL 32056**

Telephone Number: **755-0600**

9. Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is specified) \_\_\_\_\_

Steven J. Bowie (SEAL)  
STEVEN J. BOWIE  
F. SFB

\_\_\_\_\_  
(SEAL.)

Sworn to and subscribed before me this 12th day of April, 2005, by STEVEN J. BOWIE, who is personally known to me or who has produced Driver License as identification.

Martha Bryan  
Notary Public

My Commission Expires: \_\_\_\_\_



**Martha Bryan**  
Commission # DD232534  
Expires August 10, 2007  
Bonded Troy Felt - Insurance, Inc. 800-388-7019

Inst:2005008879 Date:04/18/2005 Time:14:23

DC, P. DeWitt Cason, Columbia County B:1043 P:1804



#22972



13618 NW 270<sup>th</sup> Ave.  
Alachua, FL 32615  
(386) 418-4387

**CERTIFICATE OF COMPLIANCE FOR TERMITE PROTECTION**  
(As required by Florida Building Code (FBC) 1816.1.7)

Address of treatment or lot/block of treatment:

5796 SW Ichetucknee Ave Fort White, FL 32038

Describe method of termite prevention treatment:

Trench & Treat around structure

The building has received a complete treatment for the prevention of subterranean termites. Treatment is in accordance with rules and laws, established by the Florida Department of Agriculture and Consumer Services.

  
\_\_\_\_\_  
Authorized Signature

# COLUMBIA COUNTY FLORIDA DEPARTMENT OF BUILDING AND ZONING INSPECTION OCCUPANCY

## COLUMBIA COUNTY, FLORIDA

### Department of Building and Zoning Inspection

*This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.*

Parcel Number 01-6S-15-00498-004

Building permit No. 000022972

Use Classification SFD, UTILITY

Fire: .00

Permit Holder OWNER BUILDER

Waste: .00

Owner of Building STEVEN & CONNIE BOWIE

Total: .00

Location: 5796 ICHETUCKNEE AVE

Date: 11/17/2005



*[Signature]*

Building Inspector

POST IN A CONSPICUOUS PLACE  
(Business Places Only)



## NOTICE OF INSPECTION AND/OR TREATMENT

# 22972

Date of Inspection

5/4/05

Date of Treatment

Terminator 235 gal @ .0690

Pesticide Used

Sub-Termite

Wood-Destroying Organisms Treated

It is a violation of Florida State Law (Chap. 482-226)  
for anyone other than the property owner  
to remove this notice.

- Lawn Spraying
- Household Pest Control
- Tree & Shrub Spraying
- Termite Control



**Pest Control, Inc.**  
13618 NW 270th Ave.  
Alachua, FL 32615

Call: **386-418-4387**  
for a free inspection & estimate