




CERTIFICATE OF APPROPRIATENESS

MINOR OR MAINTENANCE ONLY

Date: 03/18/2025	COA 25-07
Address: 259 NE Hernando Ave, Lake City, FL	
Parcel Number: 12661-000	
Owner: EIK's BPOE # 893	
Address of Owner:	
Description of Structure: Two story commercial building	
The described structure or portion of the structure has been reviewed for compliance with the requirements of the City Historic Preservation Land Development Regulations for the exterior construction as submitted by the applicant per Ordinance Number 2020-2176	
	
Bryan Thomas Principle Planner	
Code Edition: 2023 (8th) Edition of the Florida Building Codes, 2023 (8th) Edition of the Florida Fire Prevention Code and the 2017 U.S. Secretary of the Interior's Standards for Rehabilitation	
Description of Approved Construction:	
Remove the plywood on the south side of the building that is where the windows were. Replace with concrete block and trimmed to look like a window.	
Special Conditions:	

The City of Lake City's Growth Management Department and the City Historic Preservation Committee

205 N Marion Avenue

Lake City, Florida 32055

(386) 719-5750



DEPARTMENT OF GROWTH MANAGEMENT
 205 North Marion Avenue
 Lake City, Florida 32055
 Telephone: (386) 752-2031
growthmanagement@lcfla.com

COA 25-07

HISTORIC PRESERVATION AGENCY (HPA)
 Certificate of Appropriateness (COA) Application

USE THIS FORM TO

Apply for approval for projects located within historic districts. Projects may require either a Agency-level review or a Staff-level review.

Once application is submitted it will be reviewed for completeness. Once verified complete the applicant will be notified.

Type of Review	Reviewed By	Date
Certificate of Appropriateness (COA): Staff Review		
Certificate of Appropriateness (COA): HPA Review - Single Family Structure or its Accessory Structure		
Certificate of Appropriateness (COA): HPA Review - All Other Structures		
After-the-Fact Certificate of Appropriateness (COA): if work begun prior to issuance of a COA		

BASIS FOR REVIEW

All applications, whether Staff or HPA review, are reviewed for consistency with the City of Lake City Comprehensive Plan, Land Development Code, and applicable guidelines such as the Guidelines for the Historic Districts are based on the U.S. Secretary of the Interior's Standards for Rehabilitation.

PROJECT TYPE	
<input type="checkbox"/> New Construction	<input type="checkbox"/> Addition <input type="checkbox"/> Demolition <input type="checkbox"/> Fence <input type="checkbox"/> Paint
<input checked="" type="checkbox"/> Repair	<input type="checkbox"/> Relocation <input type="checkbox"/> Re-Roof/Roof-Over <input type="checkbox"/> SignShed <input type="checkbox"/> Garage
Classification of Work (see LDR 10.11.3)	
<input type="checkbox"/> Routine Maintenance	<input type="checkbox"/> Minor Work <input type="checkbox"/> Major Work
APPROVAL TYPE:	<input type="checkbox"/> Staff Approval
See Certificate of Appropriateness Matrix	<input type="checkbox"/> Board Approval: <input type="checkbox"/> Conceptual or <input type="checkbox"/> Final
PROPERTY INFORMATION: <i>Property information can be found at the Columbia County Property Appraiser's Website</i>	
Historic District: <input type="checkbox"/> Lake Isabella Historical Residential District	
<input checked="" type="checkbox"/> Downtown Historical District	
Site Address: <u>259 ^{NE} SW Avenida</u>	
Parcel ID #(s) <u>12661-000</u>	
OWNER OF RECORD	APPLICANT OR AGENT
<small>As recorded with the Columbia County Property Appraiser</small>	<small>If other than owner. If an agent will be representing the owner, an Owner's Authorization for Agent Representation form must be included</small>
Owner(s) Name <u>ELKS BPOE #813</u>	Applicant Name <u>STANLEY COX</u>
Company (if applicable)	Company (if applicable)
Street Address <u>Po Box 1122 LC FL 32</u>	Street Address <u>70 Box 1122</u>
City/State/Zip <u>L.C. FL 32056</u>	City/State/Zip <u>LC, FL 32056</u>
Telephone Number <u>954-709-9854</u>	Telephone Number <u>954-709-9854</u>
E-Mail Address <u>gsolenski@bellsouth.net</u>	E-Mail Address <u>gsolenski@bellsouth.net</u>

Historic Preservation Agency Meetings are held the 1 st Tuesday of the month at 5:30PM in the City Council Chambers (205 N Marion Ave.)												
Application Deadline (12:30PM)	Dec 01 2022	Jan 03 2023	Feb 01 2023	Mar 01 2023	Apr 01 2023	May 01 2023	Jun 01 2023	Jul 01 2023	Aug 01 2023	Sep 01 2023	Oct 01 2023	Nov 01 2023
Meeting Date	Jan 04 2023	Feb 07 2023	Mar 07 2023	Apr 04 2023	May 02 2023	Jun 06 2023	Jul 05 2023	Aug 01 2023	Sep 06 2023	Oct 03 2023	Nov 07 2023	Dec 05 2023

**IMPORTANT
NOTES**

**PRE-APPLICATION
MEETING**

To guide you through the process and to ensure that your application is properly processed, you'll need to meet with the Planner prior to submitting your application. This should be done prior to your anticipated submittal date to allow time for review.

Staff approval applications are accepted on a rolling basis and are generally completed within 10 business days. Please note that projects can only begin after receiving a Certificate of Appropriateness (COA) and a building permit (if required).

**CONCEPTUAL
APPROVALS**

Conceptual approvals are provided by the HPA as a courtesy to the applicant in an effort to allow comment from the Historic Preservation Agency during the conceptual design process. The HPA will provide the applicant with feedback and guidance relating to the proposal. In all cases, the applicant must return to the HPA to seek final approval of their projects.

**APPLICATION
REQUIREMENTS**

- A complete/ signed application. (If all requirements are not submitted it could delay your approval);
- Proof of Ownership (copy of deed or tax statement);
- A current survey of the property, for new construction and any change to existing footprint. (no older than two years);
- 1 digital set of elevations & plans (to scale);
- Photographs;
- Any additional backup materials, as necessary;
- If applying as an agent, *Owner's Authorization for Agent Representation* form must be signed/ notarized and submitted as part of the application;
- For window replacement, a *Window Survey* must be completed.

PROJECT DESCRIPTION

DESCRIBE THE PROPOSED PROJECT AND MATERIALS.
Describe the proposed project in terms of size, affected architectural elements, materials, and relationship to the existing structure(s).

*South Elevation 3 window lintels see detail on sheet
& will be replaced with new CMU stucco
& Bonded to outline like window look.*

List proposed materials:

Project Scope	Manufacturer	Product Description	Color (Name/Number)
Exterior Fabric			
Doors			
Windows			
Roofing			
Fascia/Trim			
Foundation			
Shutters			
Porch/Deck			
Fencing			
Driveways/Sidewalks			
Signage			
Other		<i>CMU Block / Stucco / PVC Bands Strips</i>	

Painted to Resemble

PLEASE SUBMIT ALL PRODUCT BROCHURES, PAINT COLOR SAMPLES, AND MATERIAL SAMPLES WITH YOUR APPLICATION.

*w/ window
color*

DID YOU REMEMBER

Review the Historic District Application Checklist (Article 10 LDR) to ensure you are including all required materials. If all requirements are not submitted, it will delay your approval.

Review the applicable Guidelines (Article 10 LDR)

A pre-application meeting is required before a final application for HPA Review. (Please call 386-752-2031 to schedule an appointment)

Please see the City of Lake City Land Development Regulations for detailed information.

Historic Preservation Districts maps are located on the city web site (www.lcfla.org)

Historic Preservation Agency can be found in the LDR Article 10.

Variations can be found in the LDR Article 11

The Land Development Regulations can be located on the city web site (www.lcfla.org)

APPEALS

Agency Decisions – Persons with standing, as listed in LDR Article 10, Section 10.11.6, may appeal a decision of the HPA, as outlined in Article 11, Section 11.1.4

Administrative Decisions – Persons with standing, as listed in LDR Article 10, Section 10.11.6, may appeal a decision of the Administrator, as outlined in Article 10, Section 10.11.5.

DEMOLITIONS (if applicable)

Please identify any unique qualities of historic and/or architectural significance, the prevalence of these features within the region, city, or neighborhood, and feasibility of reproducing such a building, structure, or object.

Remove Plywood + INFILL 3 windows on South Elevation with CMU + STUCCO PVC STRIPS to RESEMBLE the window features.

Discuss measures taken to save the building/structure/object from collapse. Also, address whether it is capable of earning a reasonable economic return on its value.

Lintels above Deteriorated + All Leaking water INSIDE BLDG.

RELOCATIONS (if applicable)

For relocations, address the context of the proposed future site and proposed measures to protect the physical integrity of the building.

Additional criteria for relocations and demolitions: Please describe the future planned use of the subject property once vacated and its effect on the historical context.

MODIFICATION OF EXISTING ZONING REQUIREMENTS (If Applicable)

Any change shall be based on competent demonstration by the petitioner of Article 4 of the Land Development Code.

Modification of dimensional requirements. To facilitate new construction, redevelopment, rehabilitation, or relocation of buildings or structures in historic districts or individually listed on the local register, the Administrator or the appropriate board within the development review process may determine dimensional requirements such as front, side, and rear setbacks, building height, separation between buildings, floor area ratios, and maximum lot coverage for buildings and structures based on historic development patterns. Any change shall be based on competent demonstration by the petitioner of the following:

- a. *The proposed development will not affect the public safety, health, or welfare of abutting property owners or the district;*
- b. *The proposed change is consistent with historic development, design patterns or themes in the historic district. Such patterns may include reduced front, rear, and side yard setbacks, maximum lot coverage and large floor area ratios;*
- c. *The proposal reflects a particular theme or design pattern that will advance the development pattern of the historic district; and*
- d. *The proposed complies with utility, stormwater, access requirements, and other requirements related to site design in the Land Development Code.*

Where the proposed modification would encroach into a side or rear yard setback that adjoins an existing lot, notice shall be provided to the adjacent property owner. Staff or the appropriate reviewing board will document the basis for its decision. If staff makes the decision, it will provide a written determination on the complete modification request within 21 calendar days of receiving the request. If the adjacent property owner objects to the encroachment in writing within 16 calendar days of the date from which the notice was mailed, the request shall be referred to the Board of Adjustment, which shall review the request using the same standards in this section used by staff. If the decision is to be made by a board, the board shall hear the objection of the adjacent property owner as part of its public hearing. The remainder of the requirements, regulations and procedures set forth in this chapter shall remain applicable.

Modification of building code requirements. Structures and buildings listed individually on the local register or deemed contributing to the character of a district listed on the local register shall be deemed historic and entitled to modified enforcement of the standard codes where appropriate.

Please describe the requested zoning modification, addressing a through d above:

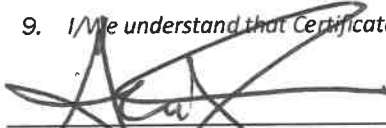
The requested modification will change the following zoning or building requirement in this manner:

(select only those that apply)	Required	Existing	Proposed
Front <u>Side</u> or Rear building Setback Lines			
Building Height			
Building Separation			
Floor Area Ratio (FAR)			
Maximum Lot Coverage			

CERTIFICATION


By signing below, I certify that the information contained in this application is true and correct to the best of my knowledge at the time of the application. I acknowledge that I understand and have complied with all of the submittal requirements and procedures and have read and understand the following:

1. I/We hereby attest to the fact that the above supplied property address(es), parcel number(s) and legal description(s) is (are) the true and proper identification of the area of this petition.
2. I/We authorize staff from the Department of Growth Management to enter onto the property in question during regular city business hours in order to take photos which will be placed in the permanent file.
3. I/We understand that the COA review time period will not commence until the application is deemed complete by staff and may take up to 10 days to process. I further understand that an incomplete application submittal may cause my application to be deferred to the next posted deadline date.
4. I/We understand that, for Agency review cases, an agenda and staff report will be available on the City's website approximately one week before the Historic Preservation Agency meeting.
5. I/We understand that the Historic Preservation Agency meetings are conducted in a quasi-judicial hearing and as such, exparte communications are prohibited (Communication about your project with a Historic Preservation Agency member).
6. I/We understand that the approval of this application by the Historic Preservation Agency or staff in no way constitutes approval of a Building Permit for construction from the City of Lake City Growth Management.
7. I/We understand that all changes to the approved scope of work stated in a COA have to be approved by the HPA before work commences on those changes. There will be no charge for a revision to a COA. Making changes that have not been approved can result in a Stop Work Order being placed on the entire project.
8. I/We understand that any decision of the HPA may be appealed to the City Council. A person with standing, as described in LDR Article 10, Section 10.11.6, may file a petition to appeal and shall be presented within thirty (30) days after the decision of the HPA; otherwise the decision of the HPA will be final.
9. I/We understand that Certificates of Appropriateness are only valid for one (1) year from issuance.


 Applicant (Signature)

3/10/25
 Date

Gerald D Sioranski Lead Dir, Knight | Esquire
 Applicant (Print)

Please submit this application And all required supporting Materials via email to: growthmanagement@lcfla.com Once the application is received and deemed complete, the applicant will be notified as to whether this will be a staff review or HPA review.	TO BE COMPLETED BY CITY ADMINISTRATOR		Date Received <u>3/10/25</u>	Received By: 
	COA <u>25-01</u>			<input type="checkbox"/> Staff Approval <input type="checkbox"/> Single Family Structure or its Accessory Structure <input type="checkbox"/> Multi-Family requiring HPA approval <input type="checkbox"/> After-The-Fact Certificate of Appropriateness
	Zoning: <u>RD</u>			
	Contributing	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	Pre-Conference	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	Application Complete	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Request for Modification of Setbacks	<input type="checkbox"/> Yes <input type="checkbox"/> No			



DEPARTMENT OF GROWTH MANAGEMENT

205 North Marion Avenue
Lake City, Florida 32055
Telephone: (386) 752-2031
growthmanagement@lcfia.com

OWNER'S AUTHORIZATION FOR AGENT REPRESENTATION

USE THIS FORM TO: Grant an agent authorization to represent you in applying for applications to the City of Lake City Department of Growth Management.

I /WE Stephan Witt Lake city ELKS Club Inc
(print name of property owner(s))

hereby authorize: Gerard Solowski
(print name of agent)

to represent me/us in processing an application for: Building Permits + Paperwork for same
(print type of application)

on our behalf. In authorizing the agent to represent me/us, I/we, as owner/owners, attest that the application is made in good faith and that any information contained in the application is accurate and complete.

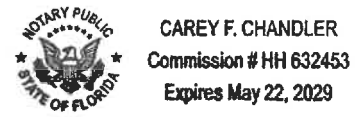
<input checked="" type="checkbox"/> <u>Stephan M Witt</u> (Signature of owner)	_____
<input checked="" type="checkbox"/> <u>Stephan M Witt</u> (Print name of owner)	_____

STATE OF FLORIDA }
COUNTY OF }

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization,
this 17 day of March, 20 25, by
Stephen M. Witt

Carey F. Chandler Notary Public Carey F. Chandler Printed Name May 22, 2029 My Commission Expires

Personally Known OR
 Produced Identification ID Produced: _____



From: Gerald Solenski Jr. gsolenski@bellsouth.net

Date: Mar 17, 2025 at 9:26:22 AM

To: JERRY SOLENSKI gsolenski@bellsouth.net

DOCUMENT# N00000007178

Entity Name: LAKE CITY ELKS CLUB, INC.

Current Principal Place of Business:

259 NE HERNANDO AVE.

LAKE CITY, FL 32055

FILED

Mar 08, 2024

Secretary of State

0489579746CC

Current Mailing Address:

P.O. BOX 1122

LAKE CITY, FL 32056

FEI Number: [59-0604454](#) **Name and Address of Current Registered Agent:**

WITT, STEPHEN M

259 NE HERNANDO AVE.

LAKE CITY, FL 32055 US

Certificate of Status Desired:

Yes

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

STEPHEN WITT

03/08/2024

Electronic Signature of Registered Agent **Officer/Director Detail :**

Title PRESIDENT

Name WILLIAM , ROBERTS

Address 259 NE HERNANDO AVE.

City-State-Zip: LAKE CITY FL 32055

Title TREASURER

Name COX, STANLEY

Address 259 NE HERNANDO AVE.

City-State-Zip: LAKE CITY FL 32055

Title SECRETARY

Name WILLIAMS, RENEE

Address 259 NE HERNANDO AVE.

City-State-Zip: LAKE CITY FL 32055

Date

Title CHAIRMAN

Name CHRIS, SAMSON

Address 259 NE HERNANDO AVE.

City-State-Zip: LAKE CITY FL 32055

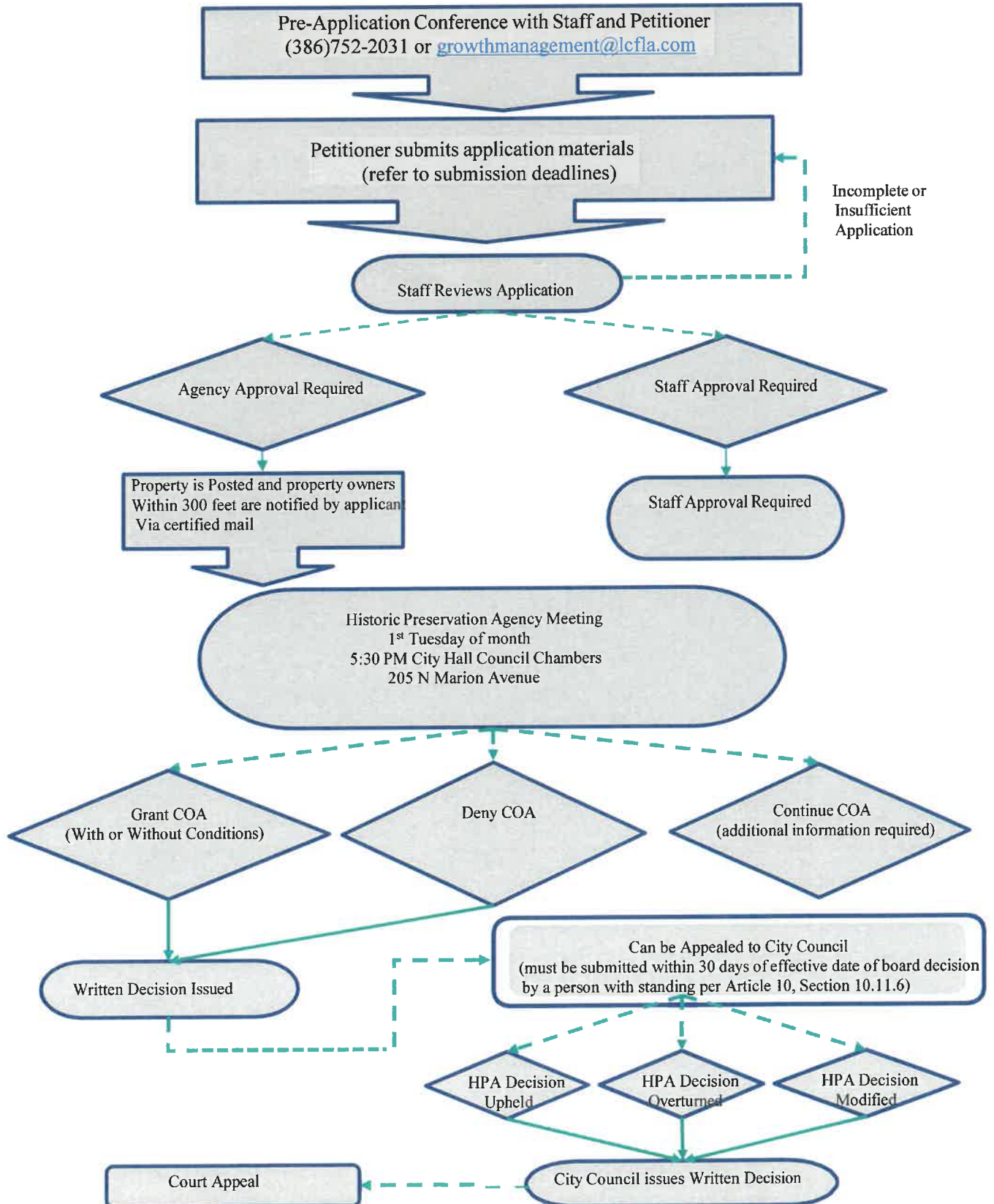
Title DIRECTOR

Name WILLIAMS, CHRIS

Address 259 NE HERNANDO AVE.

City-State-Zip: LAKE CITY FL 32055

CERTIFICATE OF APPROPRIATENESS PROCESS FLOWCHART





AA

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Open in the Google Maps app

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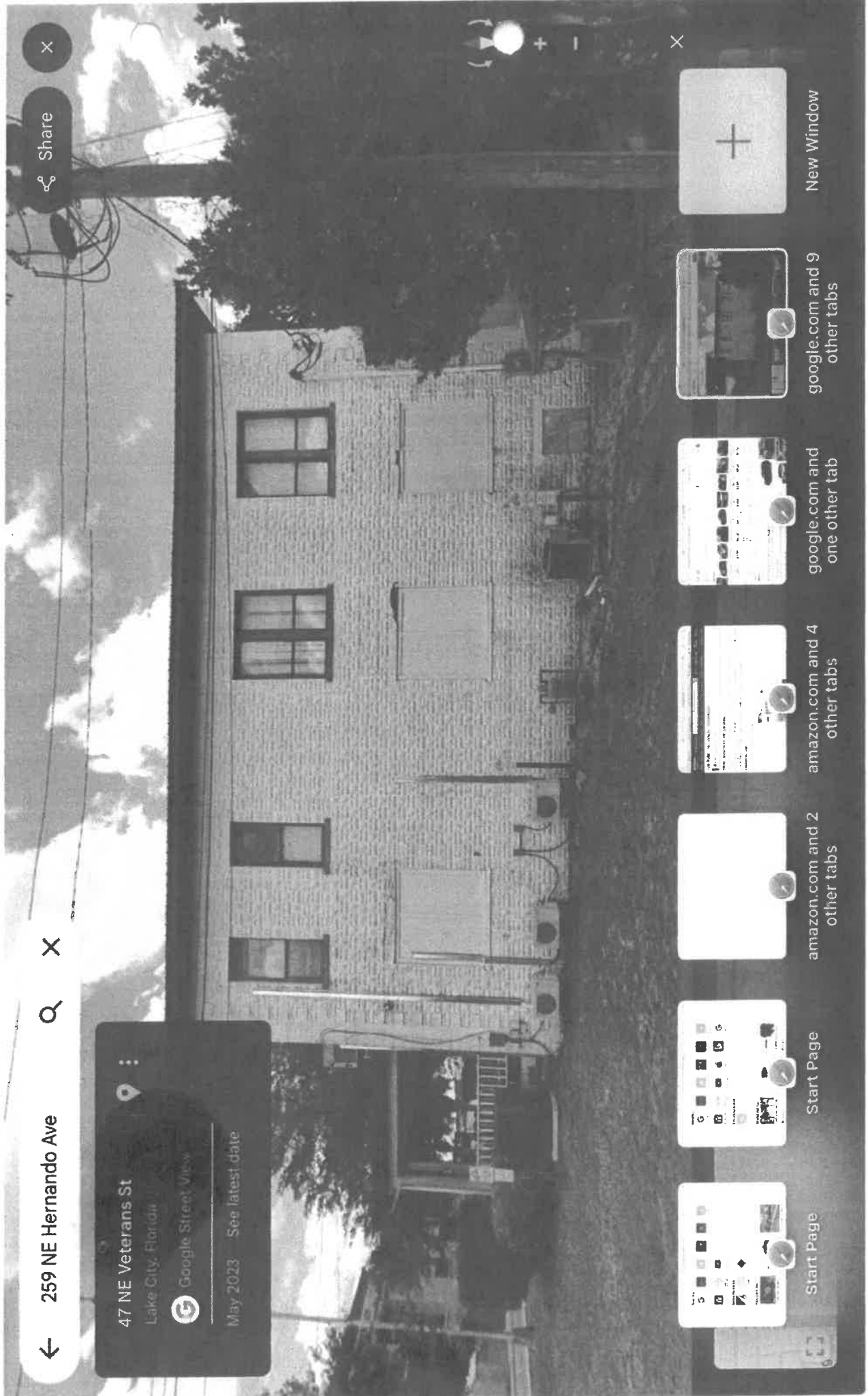


259 NE Hernando Ave



47 NE Veterans St
 Lake City, Florida
 Google Street View
 May 2023 See latest date

Share



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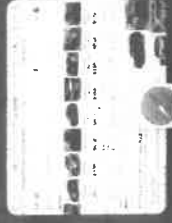
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amazon.com and 2 other tabs



amazon.com and 4 other tabs



google.com and one other tab



google.com and 9 other tabs



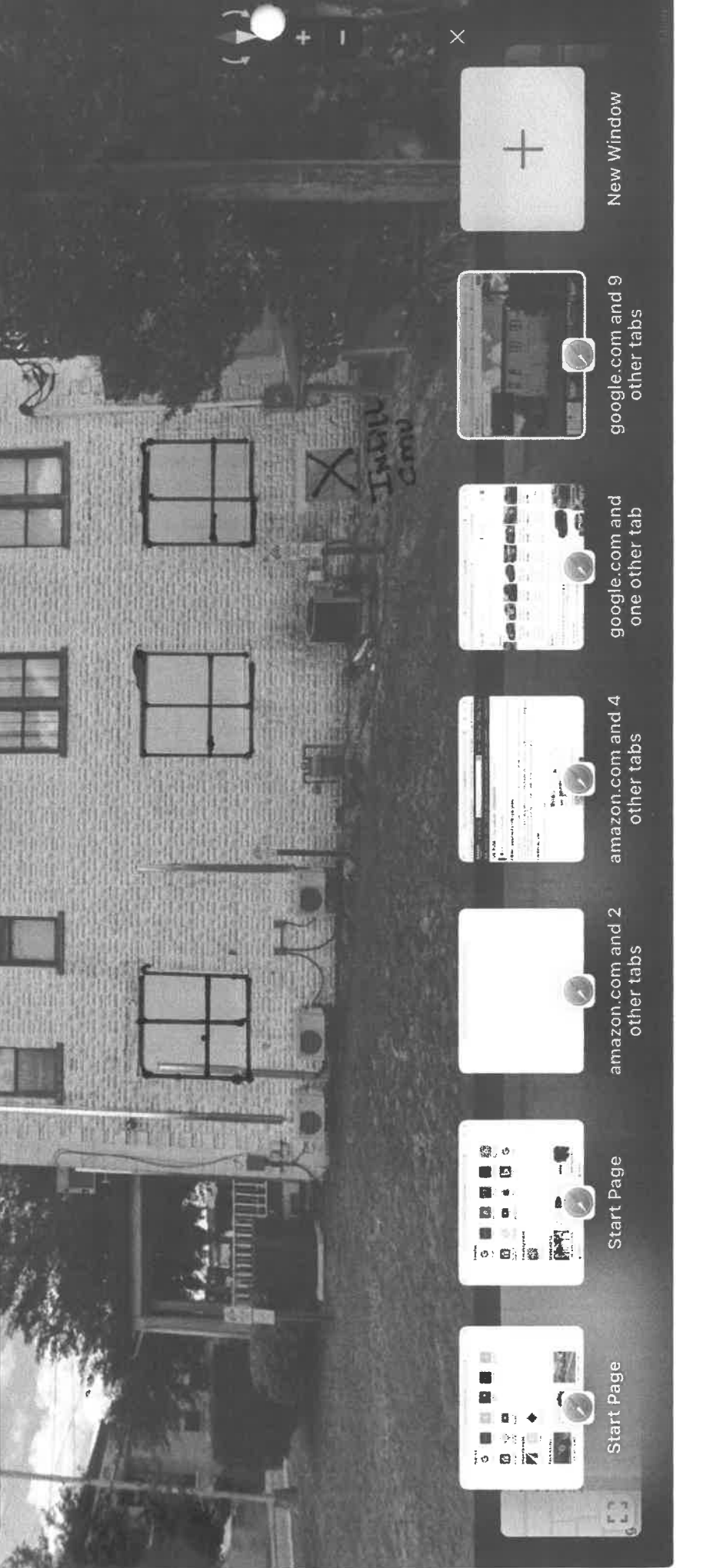
New Window

259 NE Hernando Ave

47 NE Veterans St
 Lake City, Florida

Google Street View

May 2023 [See latest date](#)



Share

OPEN



New Window



google.com and 9 other tabs



google.com and one other tab



amazon.com and 4 other tabs



amazon.com and 2 other tabs

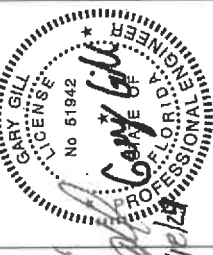


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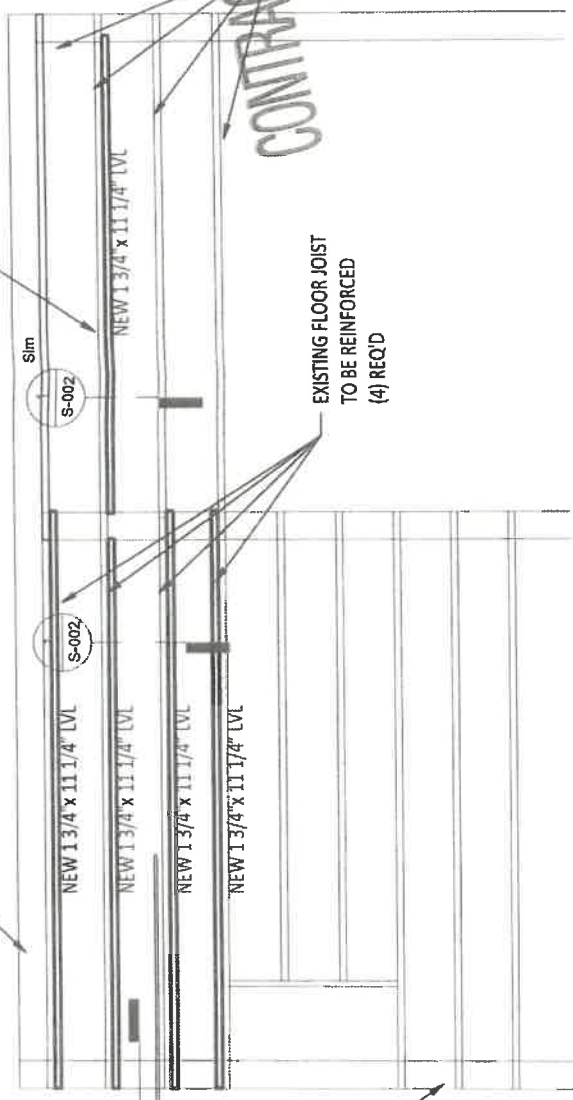
REVISION SCHEDULE	
REV.	DATE
0	8/28/24



GILL ENGINEERING SERVICES, INC.
 AUTH #30824
 GARY GILL, PE #51942
 163 SW MDTOWN PL SUITE 101
 LAKE CITY, FL 32025
 386-590-1242

2431-055	5-001	0
BEAM REPAIR PLAN		
ELKS LODGE	GILL ENGINEERING SERVICES, INC.	
BEAM REPAIR & WALL ENCLOSURE		

REINFORCED DAMAGE FLOOR JOIST



CONTRACTOR COPY

REVIEWED FOR COMPLIANCE
 FLOOR BUILDING CODES
 National Electric Code
 Reviewed By: *[Signature]*
 DATE: 8/28/24

SHEET SCHEDULE			
SHEET NUMBER	SHEET NAME	REVISION	REVISION DATE
S-001	BEAM REPAIR PLAN	0	8/28/24
S-002	BEAMS DETAILS	0	8/28/24
S-003	EXTERIOR WALL REPAIR	1	9/3/24
S-004	STRUCTURAL NOTES	0	8/28/24

1 FLOOR FRAMING
 3/8" = 1'-0"

REVISION SCHEDULE	
REV.	DATE
0	8/28/24

ISSUED FOR CONSTRUCTION



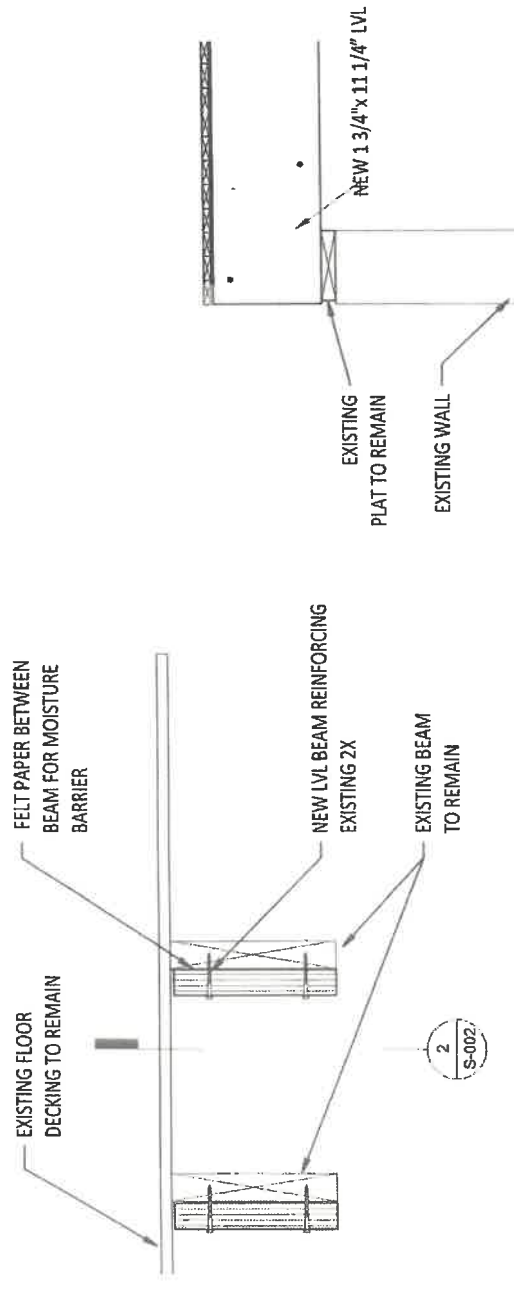
GILL ENGINEERING SERVICES, INC.
 AUTH #30824
 GARY GILL, PE #51942
 163 SW MDTOWN PL
 LAKE CITY, FL 32025
 386-590-1242

2431-055	S-002	0
BEAMS DETAILS		
BEAM REPAIR & WALL ENCLOSURE	ELKS LODGE	



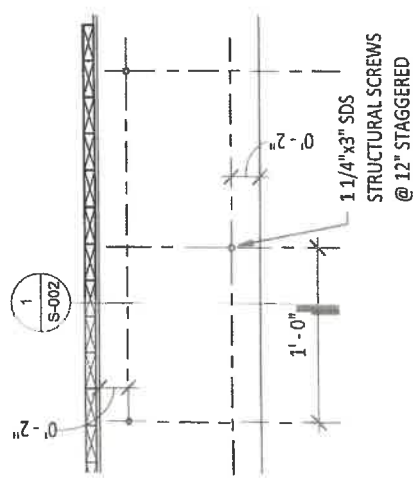
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REVIEWED FOR COMPLIANCE
 FLORIDA BUILDING CODES
 National Electrical
 Reviewer By: [Signature]
 DATE: [Blank]



1 BEAM DETAIL
 1 1/2" = 1'-0"

3 DETAIL EDGE
 1" = 1'-0"



2 CONNECTION DETAIL
 1 1/2" = 1'-0"

REVISION SCHEDULE		
REV.	DATE	REVISION DESCRIPTION
1	9/3/24	REVISED



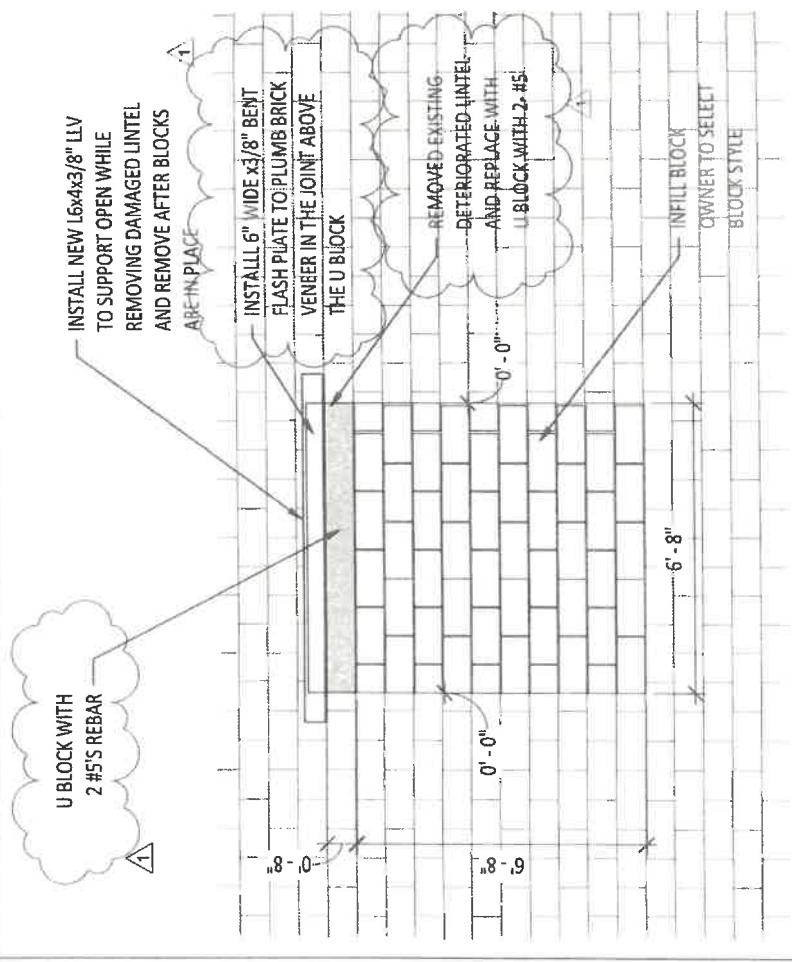
GILL ENGINEERING SERVICES, INC.
 AUTH #30824
 GARY GILL, PE #51942
 163 SW MDTOWN PL
 LAKE CITY, FL 32025
 386-590-1242

EXTERIOR WALL REPAIR	2431-055
	S-003
BEAM REPAIR & WALL ENCLOSURE	EIKS LODGE
	1

Handwritten signature and date: 2/1/23

CONTRACTOR COPY

Gill Engineering Services, Inc.
 REVIEWED FOR COMPLIANCE
 FLORIDA BUILDING CODE
 National Electric Code
 Reviewed By: *[Signature]*
 DATE: *2/2/23*



1 WALL ELEVATION
 3/8" = 1'-0"

REVISION SCHEDULE	
REV.	DATE
0	8/28/24
REVISION DESCRIPTION	
ISSUED FOR CONSTRUCTION	

2/10/25
 STATE OF FLORIDA
 PROFESSIONAL ENGINEER
 12478

GILL ENGINEERING SERVICES, INC.
 AUTH #30824
 163 SW MDTOWN PL
 LAKE CITY, FL 32025
 386-590-1242

BEAM REPAIR & WALL ENCLOSURE	ELKS LODGE	2431-055
STRUCTURAL NOTES		S-004
0		

GENERAL WOOD NOTES:

- DIMENSIONAL LUMBER USED AS STRUCTURAL FRAMING (i.e. JOISTS, RAFTERS, HEADERS) SHALL BE SOUTHERN YELLOW PINE NO.2 OR EQUAL.
- DIMENSIONAL LUMBER USED FOR STUDS WALLS SHALL BE STUD GRADE UNLESS NOTED OTHERWISE. STUDS SHALL HAVE BE SPACES AT 16" MIN WITH A DOUBLE TOP PLATE. SPLICES IN THE DOUBLE TOP WALLS SHALL BE ALTERNATE TOP AND BOTTOM. IN NO CASE SHALL 2x4 BEARING WALLS SUPPORT MORE THAN TWO FLOORS OF FRAMING IN ADDITION TO ROOF AND CEILING
- ROUGH CUT TIMBER USED AS STRUCTURAL FRAMING SHALL BE AS SPECIFIED IN THE CONSTRUCTION DOCUMENTS
- ALL LUMBER IN CONTACT WITH THE GROUND, CONCRETE SHALL BE PRESSURE-TREATED. CONTRACTOR MAY SUBMIT FOR APPROVAL A MOISTURE BARRIER IN-LIEU OF THE PRESSURE TREATED WOOD.
- FASTENERS FOR PRESERVATIVE-TREATED AND FIRE-RETARDANT TREATED WOOD SHALL BE OF HOT-DIPPED ZINC COATED GALVANIZED STEEL OR STAINLESS STEEL AND SHALL FOLLOW CURRENT SIMPSON GUIDELINES BASED ON WEATHER EXPOSURE WHERE STAINLESS STEEL CONNECTORS OR HOT DIPPED CONNECTORS ARE SPECIFIED IN THE DRAWINGS. STAINLESS STEEL OR HOT DIPPED GALVANIZED FASTENERS SHALL BE USED TO MATCH THE CONNECTORS TYPE.
- ALL NAILS FOR STRUCTURAL WORK SHALL BE COMMON WIRE NAILS UNLESS NOTED OR DETAILED OTHERWISE MEETING ASTM F1667. HOLES SHALL BE PRE-DRILLED WHERE NECESSARY TO PREVENT SPLITTING. NAILS SHALL HAVE THE MINIMUM PROPERTIES SPECIFIED IN THE TABLE BELOW:

NAIL TYPE	SHANK DIAMETER - INCHES	MINIMUM PENETRATION - INCHES
6d	0.133	1.13
8d	0.131	1.13
10d	0.148	1.18
12d	0.148	1.63
16d	0.162	1.63

CONTRACTOR COPY

MAILING NOT SHOWN ON THE STRUCTURAL DRAWINGS SHALL BE PER THE MAILING SCHEDULE BELOW:

- JOIST SITTING ON SILL OR GIRDER
- BLOCKING BETWEEN JOIST/RAFTERS
- RIM BLOCKING BETWEEN JOIST/RAFTERS
- TOP PLATE TO STUD
- STUD TO SILL PLATE
- DOUBLE STUDS
- DOUBLE TOP STUDS - BETWEEN SPLICE NAILING
- DOUBLE TOP STUDS - EACH SIDE OF SPLICE PLATE (B) 16d
- BLOCKING TO TOP PLATE
- BLOCKING TO FLOOR/ROOF SHEATHING
- RIM JOIST OR BLK TO TOP PLATE OR SILL PLATE
- CONTINUOUS (2) AND (3) PIECE HEADERS
- CEILING JOIST LAPS OVER PARTITIONS
- RAFTER TO TOP PLATE OR SILL PLATE
- BUILT-UP CORNER STUDS
- TONGUE AND GROOVE DECKING
- CROSS BRIDGING
- HORIZONTAL BLOCKING BETWEEN WALL STUDS

MASONRY

- ALL MASONRY UNITS SHALL COMPLY WITH ASTM C 90 WITH A COMPRESSION STRENGTH OF 1900 PSI (NET AREA). Fm = 1500 PSI
- MORTAR SHALL BE TYPE S.
- GROUT: Fc = 2000 PSI
- CELLS CONTAINING REBAR SHALL BE GROUTED SOLID FROM BOTTOM TO THE TOP OF WALL IN ACCORDANCE WITH THE FLORIDA BUILDING CODE.
- ALL CELLS BELOW GRADE SHALL BE GROUTED SOLID.
- ALL VERTICAL REBAR SHALL BE IN PLACE AND SECURED WITH REBAR POSITIONERS PRIOR TO GROUTING.
- CELLS CONTAINING EXPANSION ANCHORS SHALL BE GROUTED SOLID. UNLESS OTHERWISE NOTES MASONRY CELLS SHALL BE GROUTED IN ACCORDANCE WITH FRC (MAXIMUM 5 FOOT GROUT LIFTS).
- LAP REBAR 48 BAR DIAMETERS (12" MIN) UNLESS NOTED OTHERWISE. ALL HORIZONTAL REINFORCING IN BOND BEAMS SHALL BE CONTINUOUS AROUND CORNERS OR HAVE BENT (CORNER) BARS OF THE SAME SIZE AND A LAP AS NOTED ABOVE. VERTICAL STEEL SHALL CONTINUE THROUGH BOND BEAMS. PROVIDE STANDARD TRUSS TYPE JOINT REINFORCING AT 16" O.C.
- USE PREFABRICATED CORNERS AND TEES AT ALL WALL CORNERS AND INTERSECTIONS RESPECTIVELY
- ALL MASONRY WALL CONFIGURATIONS INCLUDING WALL OPENINGS SHALL BE COORDINATED WITH CIVIL, MECHANICAL PLUMBING, ELECTRICAL, AND DRAWING FROM ALL OTHER DISCIPLINES.

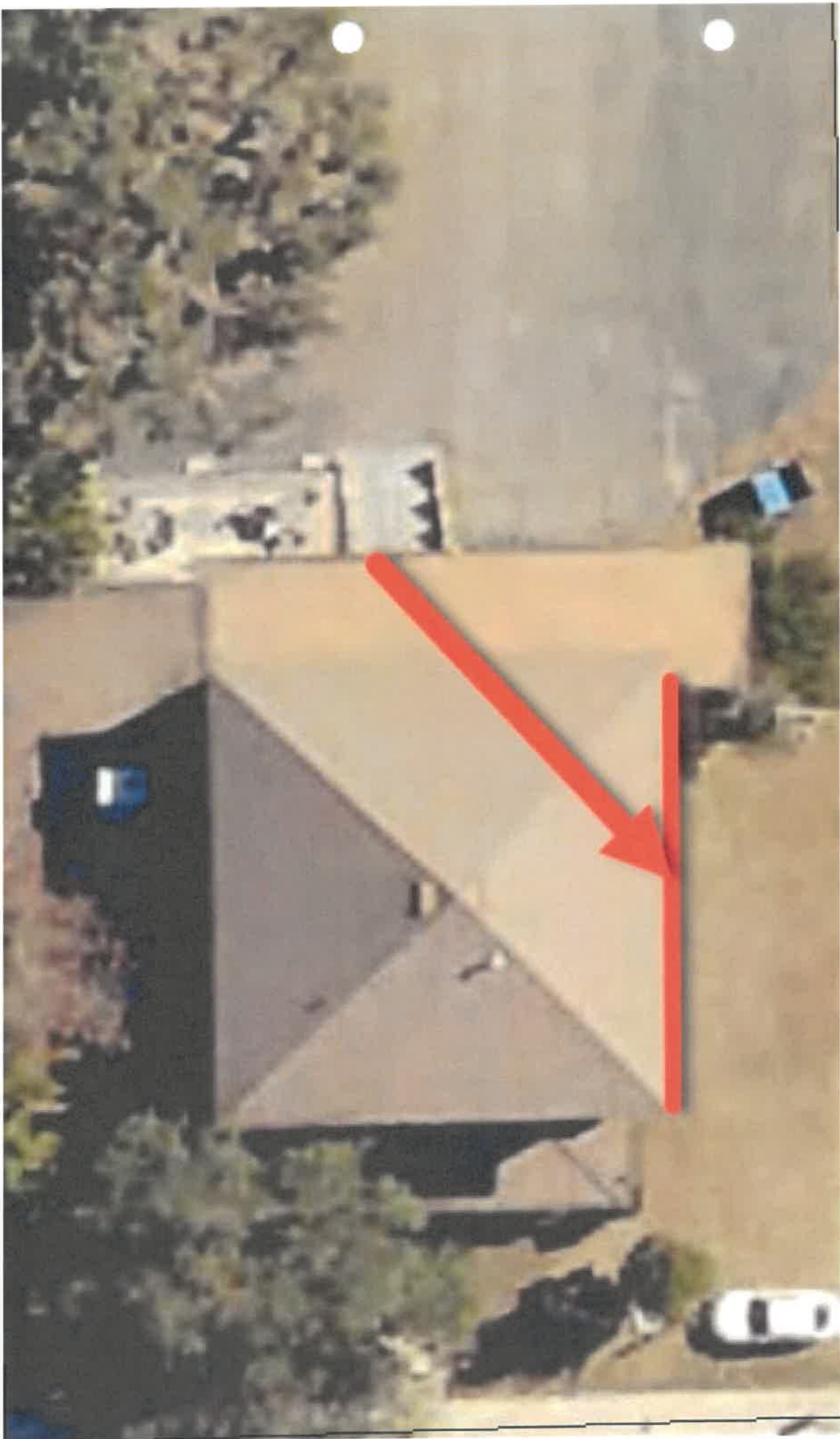
MAILING SCHEDULE NOTES:

- ALL OTHER MAILING REQUIREMENTS NOTE SHOWN ON DRAWINGS OR IN SCHEDULE ABOVE SHALL BE IN ACCORDANCE WITH 2012 IBC.
- POWER DRIVEN OR PNEUMATIC NAILS OTHER THAN COMMON NAILS MAY BE USED IF DATA IS SUBMITTED TO THE ENGINEER FOR APPROVAL PRIOR TO USE.
- MINIMUM NAIL LENGTHS SHALL BE SUFFICIENT TO ACHIEVE MINIMUM PENETRATION INTO MAIN MEMBER AS NOTED IN SCHEDULE ON NOTE ABOVE.

GILL ENGINEERING SERVICES, INC.
 AUTH #30824
 163 SW MDTOWN PL
 LAKE CITY, FL 32025
 386-590-1242

REVIEWED FOR COMPLIANCE
 FLORIDA BUILDING CODES
 PROFESSIONAL ENGINEER
 12478

2/10/25
 STATE OF FLORIDA
 PROFESSIONAL ENGINEER
 12478



COLUMBIA COUNTY PROPERTY VALUATION SUMMARY PAGE 1 of 1											
TYPE	MDL	EFF. AREA	TOT ADJ PTS	EFF. BASE RATE	REPL. COST NEW	AVB	EVB	ECON	FNCT	NORM	% COND
9500	04	7,270	66,2400	34.44	250,379	1942	1942	0	0	0	50.00
1 PRIV CLUB - 0% - 0 Heated Area: 6846											

MARKET ADJUSTMENTS									
VALUATION BY	STANDARD	VALUATION BY	STANDARD						
Tax Group: 1	125,190	Tax Dist:	09/17/2007						
BUILDING MARKET VALUE	5,500								
TOTAL MARKET OBIXF VALUE	105,820								
TOTAL LAND VALUE - MARKET	236,510								
TOTAL MARKET VALUE	236,510								
SOH/AGL Deduction	0								
ASSESSED VALUE	236,510								
TOTAL EXEMPTION VALUE	0								
BASE TAXABLE VALUE	236,510								
TOTAL JUST VALUE	236,510								
NCON VALUE	0								
INCOME VALUE	0								
PREVIOUS YEAR MKT VALUE	236,510								

PERMIT NUM	DESCRIPTION	AMT	ISSUE
349	MAINT/ALTR	70	09/17/2007

SALES DATA									
OFF RECORD Number	DATE	TYPE	Q	V	RSN	CD	SALE PRICE		

BUILDING NOTES									
UBM= W32 S12 W12 N12 W45 S13 BAS= S51 E3 FOP= S12 E71 N12 E71 N51 W74\$ E89 N13\$ PTR=E80 FBM= W48 S13 BAS= S51 E48 N W48\$ E48 N13\$ W80\$.									

BUILDING DIMENSIONS									
UBM= W32 S12 W12 N12 W45 S13 BAS= S51 E3 FOP= S12 E71 N12 E71 N51 W74\$ E89 N13\$ PTR=E80 FBM= W48 S13 BAS= S51 E48 N W48\$ E48 N13\$ W80\$.									

TOTAL OBIXF																			
L	OBIXF	DESCRIPTION	BLD CAP	L	W	UNITS	UT	Adj R	ADJ UNIT PRICE	UNIT PRICE	ADJ UNIT PRICE	LAND VALUE	OTHER ADJUSTMENTS AND NOTES	YEAR	DENSITY	DECL	FRZ	YR	CONSRV
1	0260	PAVEMENT-A	0	0	0	1.00	UT	0.00	0.00	0	3	2,500							
2	0263	FRCH, USP	0	0	0	1.00	UT	0.00	0.00	0	3	1,500							
3	0081	DECKING WI	0	0	0	1.00	UT	0.00	0.00	0	3	1,500							
TOTAL OBIXF										5,500									
TOTAL OBIXF										5,500									
TOTAL OBIXF										5,500									

LAND DESCRIPTION																			
L	USE	CLS	LAND USE DESCRIPTION	CAP	R	LOC ZONE	FRONT DEPTH	TOT LND LOTS	UNIT TYPE	UNIT PRICE	ADJ UNIT PRICE	LAND VALUE	OTHER ADJUSTMENTS AND NOTES	YEAR	DENSITY	DECL	FRZ	YR	CONSRV
1	1700	C	CLUB	0		CG	0.00	0.00	22,575.00	SF	1.00	1.00	1.25	3.75	4.69				
TOTAL OBIXF										5,500									



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