

Columbia County Building Permit Application

Revised 9-2-

For Office Use Only Application # _____ Date Received _____ By _____ Permit # 24224
Application Approved by - Zoning Official _____ Date _____ Plans Examiner _____ Date _____
Flood Zone _____ Development Permit _____ Zoning _____ Land Use Plan Map Category _____
Comments _____

Applicants Name Glenn I. Jones Phone 386-752-5389
Address 552 N.W. Hilton Ave Lake City FL 32055
Owners Name Carl Jones Phone 386 752-9528
911 Address 719 N.W. Harris Lake Dr. Lake City FL 32055
Contractors Name Glenn I. Jones Phone 386-752-5389
Address 552 N.W. Hilton Ave. Lake City FL 32055
Fee Simple Owner Name & Address Carl D & Lois B. Jones
Bonding Co. Name & Address NA
Architect/Engineer Name & Address NA
Mortgage Lenders Name & Address NA

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Ene
Property ID Number 26-35-16-02308-042 HX Estimated Cost of Construction \$7100.00
Subdivision Name Fairway View Lot 2 Block Unit 2A Phase
Driving Directions Take 90 west TO COMMERCE TURN RT GO TO EGRET TURN
Right to Harris Lake Dr turn left follow curve to left house
is on right 719
Type of Construction WD FR STUCCO Number of Existing Dwellings on Property 1
Total Acreage <1 Lot Size 100X100 Do you need a - Culvert Permit or Culvert Waiver or Have an Existing D
Actual Distance of Structure from Property Lines - Front 40 Side 20 Side 20 Rear 40
Total Building Height 10 ft Number of Stories 1 Heated Floor Area 2220 Roof Pitch 6X12

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 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 COMMENCMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOU LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA
COUNTY OF COLUMBIA

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

Contractor Signature
Contractors License Number CAC051486
Competency Card Number NA.
NOTARY STAMP/SEAL

Brenda F. Donaldson
Commission #DD314415
Expires: Apr 28, 2008
Notary Signature
Atlantic Bonding Co., Inc.

NOTICE OF COMMENCEMENT FORM
COLUMBIA COUNTY, FLORIDA

THE UNDERSIGNED hereby gives notice that improvement 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.

Tax Parcel ID Number 26-35-16-02308-042 HX

1. Description of property: (legal description of the property and street address or 911 address)
LOT 2 FAIRWAY VIEW UNIT 2-A ORB 467-727
2. General description of improvement: change HVAC
3. Owner Name & Address Carl D E Bois B Jones 719 N.W. Harris Lake Dr. Lake City, FL 32055 Interest in Property owner
4. Name & Address of Fee Simple Owner (if other than owner): _____
5. Contractor Name Glenn F. Jones Inc. Phone Number 386 752 5389
Address 552 NW Hilton Ave Lake City FL 32055
6. Surety Holders Name _____ Phone Number _____
Address _____
Amount of Bond _____
7. Lender Name _____ Phone Number _____
Address _____
8. Persons within the State of Florida designated by the Owner upon whom notices or other documents may be served as provided by section 718.13 (1)(a) 7; Florida Statutes:
Name _____ Inst:2006006018 Date:03/13/2006 Time:09:53
Address S.P. DC, P. DeWitt Cason, Columbia County B: 1076 P: 244
9. In addition to himself/herself the owner designates _____
_____ to receive a copy of the Lienor's Notice as provided in Section 718.13 (1) -
(a) 7. Phone Number of the designee _____
10. Expiration date of the Notice of Commencement (the expiration date is 1 (one) year from the date of recording, (Unless a different date is specified) _____

NOTICE AS PER CHAPTER 713, Florida Statutes:

The owner must sign the notice of commencement and no one else may be permitted to sign in his/her stead.

Carl D Jones
Signature of Owner

Sworn to (or affirmed) and subscribed before day of March 10, 2006

NOTARY STAMP/SEAL



Brenda F. Donaldson
Commission #DD314415
Expires: Apr 28, 2008
Bonded Through
Atlantic Bonding Co., Inc.
Signature of Notary

Brenda F. Donaldson