

DATE 02/10/2011

# Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000029172

APPLICANT BILL CASON PHONE 352.283.3542  
 ADDRESS 20223 NE 6TH STREET GAINESVILLE FL 32609  
 OWNER MARY LEWIS/CAROL PAYNE-JTWS PHONE \_\_\_\_\_  
 ADDRESS 196 SW MARIN GLEN FT. WHITE FL 32038  
 CONTRACTOR BILL CASON PHONE 352.283.3542

LOCATION OF PROPERTY 47-S TO C-138, TL TO RUM ISLAND RD, TR AND IT'S THE 3RD. LOT ON L PAST LANGELIER.

TYPE DEVELOPMENT ADDITION/SFD ESTIMATED COST OF CONSTRUCTION 24000.00

HEATED FLOOR AREA 480.00 TOTAL AREA 480.00 HEIGHT 12.00 STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 3'12 FLOOR CONC

LAND USE & ZONING A-3 MAX. HEIGHT 35

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 1 FLOOD ZONE XPS DEVELOPMENT PERMIT NO. \_\_\_\_\_

PARCEL ID 36-7S-16-04351-104 SUBDIVISION \_\_\_\_\_

LOT \_\_\_\_\_ BLOCK \_\_\_\_\_ PHASE \_\_\_\_\_ UNIT \_\_\_\_\_ TOTAL ACRES 8.50

\_\_\_\_\_ CBC060151 \_\_\_\_\_ *William J. [Signature]* \_\_\_\_\_

Culvert Permit No. \_\_\_\_\_ Culvert Waiver \_\_\_\_\_ Contractor's License Number \_\_\_\_\_ Applicant/Owner/Contractor \_\_\_\_\_

EXISTING 11-0024M BLK TC N

Driveway Connection \_\_\_\_\_ Septic Tank Number \_\_\_\_\_ LU & Zoning checked by \_\_\_\_\_ Approved for Issuance \_\_\_\_\_ New Resident \_\_\_\_\_

COMMENTS: NOC ON FILE. ADDITION TO EXISTING SFD.

Check # or Cash 8657

## 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 \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Framing \_\_\_\_\_ Insulation \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Rough-in plumbing above slab and below wood floor \_\_\_\_\_ Electrical rough-in \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Heat & Air Duct \_\_\_\_\_ Peri. beam (Lintel) \_\_\_\_\_ Pool \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Permanent power \_\_\_\_\_ C.O. Final \_\_\_\_\_ Culvert \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Pump pole \_\_\_\_\_ Utility Pole \_\_\_\_\_ M/H tie downs, blocking, electricity and plumbing \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Reconnection \_\_\_\_\_ RV \_\_\_\_\_ Re-roof \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

BUILDING PERMIT FEE \$ 120.00 CERTIFICATION FEE \$ 2.40 SURCHARGE FEE \$ 2.40

MISC. FEES \$ 0.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$ \_\_\_\_\_

FLOOD DEVELOPMENT FEE \$ \_\_\_\_\_ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ \_\_\_\_\_ **TOTAL FEE** 199.80

INSPECTORS OFFICE \_\_\_\_\_ CLERKS OFFICE *CH*

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."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

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

Columbia County Building Permit Application

26454

For Office Use Only Application # 1101-32 Date Received 1-27-11 By CH Permit # 29172  
 Zoning Official BLK Date 01.02.11 Flood Zone X<sub>2</sub> according Land Use A-3 Zoning A-3  
 FEMA Map # N/A Elevation N/A MFE N/A River N/A Plans Examiner J.C. Date 1-31-11  
 Comments  
 NOC  EH  Deed or PA  Site Plan  State Road Info  Well letter  911 Sheet  Parent Parcel #  
 Dev Permit # \_\_\_\_\_  In Floodway  Letter of Auth. from Contractor  F W Comp. letter  
 IMPACT FEES: EMS \_\_\_\_\_ Fire \_\_\_\_\_ Corr \_\_\_\_\_  Sub VF Form LIB for Cason, Eves  
 Road/Code \_\_\_\_\_ School Addition N/A = TOTAL (Suspended)  App Fee Paid LIB for McDougal Expires 2-3-11

Septic Permit No. 11-0042m Fax 352-485-2362

Name Authorized Person Signing Permit Bill Cason Phone 352-283-3542

Address 20223 NE 6<sup>th</sup> STREET Gainesville, FL, 32609

Owners Name MARY LEWIS, (Carol Payne, (JTWAS)) Phone \_\_\_\_\_

911 Address 196 SW marine GLEN, FORT WHITE, FL, 32038

Contractors Name Cason Builders Inc Phone 352-283-3542

Address 20223 NE 6<sup>th</sup> STREET Gainesville, FL, 32609

Fee Simple Owner Name & Address MARY LEWIS 196 SW marine Glen, FORT WHITE, FL, 32038

Bonding Co. Name & Address N/A

Architect/Engineer Name & Address MARK DISNEY P.E. PO Box 868, LAKE CITY, FL, 32056

Mortgage Lenders Name & Address N/A

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress Energy

Property ID Number 36-75-16-04351-104 Estimated Cost of Construction \$ 60,000.00

Subdivision Name N/A Lot N/A Block N/A Unit N/A Phase N/A

Driving Directions From 138 TURNOW SW marine GLE TERRACE, ROAD makes  
A SHARP CURVE go STRAIGHT on private ROAD, MAKE LEFT ON SW marine 61  
house on RIGHT Number of Existing Dwellings on Property 1

Construction of ADDITION ON REAR OF EXISTING home Total Acreage 8.5 Lot Size 8.5 acre

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 12'

Actual Distance of Structure from Property Lines - Front 106.17 Side 200.66 Side 746.06 Rear 225.46

Number of Stories 1 Heated Floor Area 312 Addition 430 Total Floor Area 1,216 Roof Pitch 3/12

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. CODE: Florida Building Code 2007 with 2009 Supplements and the 2008 National Electrical Code. Page 1 of 2 (Both Pages must be submitted together.) Revised 1-11

CH 8657  
 spoke to Bill on 2-7-11 CH



## Laurie Hodson

---

**From:** Ron Croft  
**Sent:** Thursday, February 03, 2011 2:37 PM  
**To:** 'Cason Builders, Inc.'  
**Cc:** Laurie Hodson  
**Subject:** RE: address: 196 SW Marine Glen

From Address/Parcel Number Database. Ref to addition to existing structure.

Parcel #:36-7S-16-04351-104; Address of Structure; 196 SW MARINE CT, FORT WHITE FL 32038

Ron

Ronal N. Croft  
Columbia County 911 Addressing / GIS Department P.O. Box 1787 Lake City, FL 32056-1787  
Phone: 386-758-1125  
Fax: 386-758-1365  
E-Mail: [ron.croft@columbiacountyfla.com](mailto:ron.croft@columbiacountyfla.com)

-----Original Message-----

**From:** Cason Builders, Inc. [<mailto:casonbuilders@windstream.net>]  
**Sent:** Thursday, February 03, 2011 9:36 AM  
**To:** Ron Croft  
**Subject:** address: 196 SW Marine Glen

Ron,

We spoke on the phone today. The building department wants to verify the address for parcel #36-7s-16-04351-104, address listed is 196 SW Marine Glen, Fort White, FL, 32038.  
Thank you, Bill Cason 352-283-3542



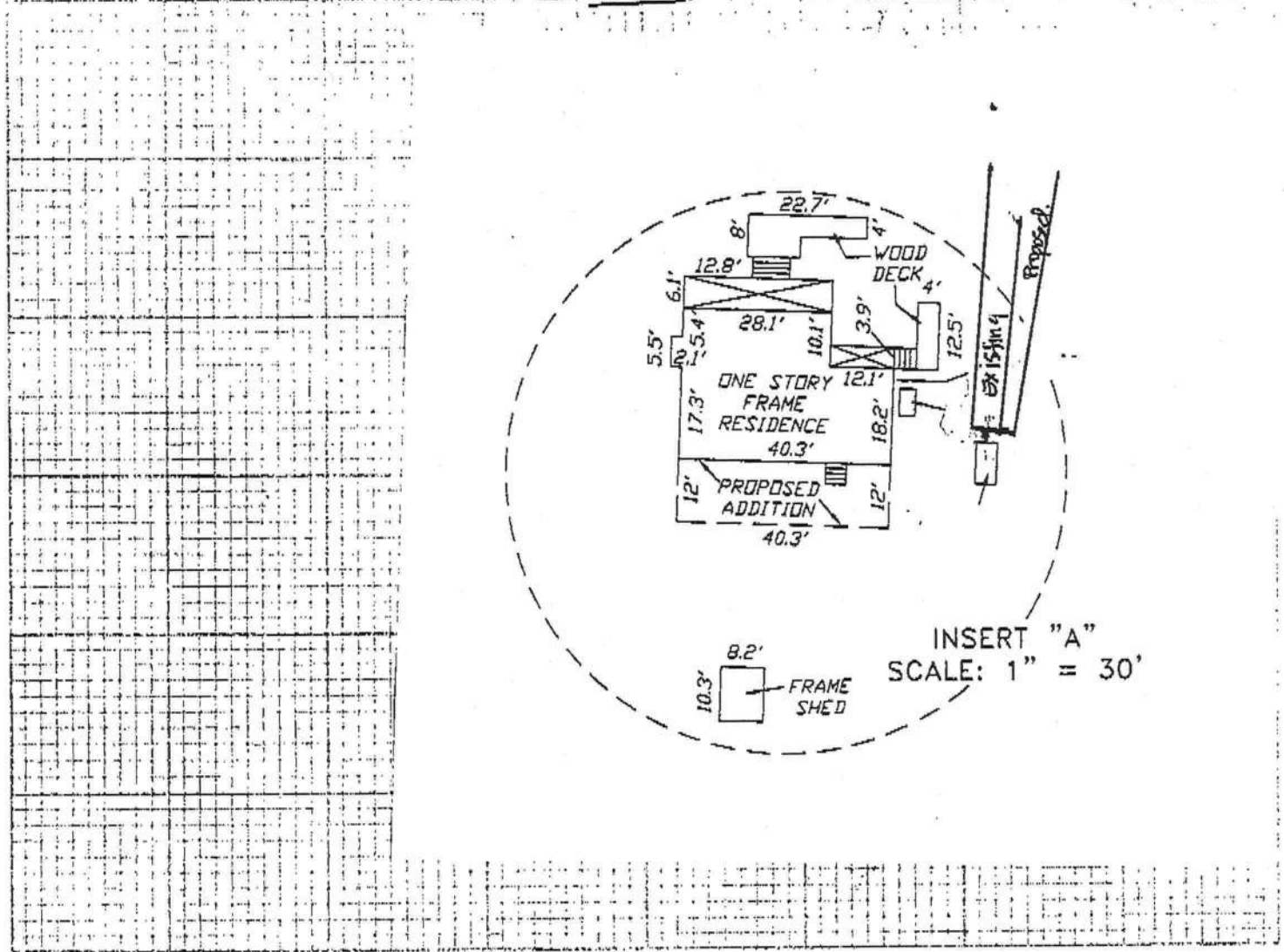
STATE OF FLORIDA  
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 11-0042M

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet. 1:30



Notes: \_\_\_\_\_  
\_\_\_\_\_

Site Plan submitted by: \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_

Plan Approved ✓ Not Approved \_\_\_\_\_ Date \_\_\_\_\_

By [Signature] \_\_\_\_\_ County Health Department

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**

11-0042M  
991742



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
ONSITE SEWAGE TREATMENT AND DISPOSAL  
SYSTEM  
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 11-0042M  
DATE PAID: 991742  
FEE PAID: 112711  
RECEIPT #: 155572

APPLICATION FOR:

- New System
- Existing System
- Holding Tank
- Innovative
- Repair
- Abandonment
- Temporary
- Modification

APPLICANT: CASON BUILDERS INC FOR MARY LEWIS

AGENT: Bill Cason

TELEPHONE: 352 283-3542

MAILING ADDRESS: 20223 WEG STREET Gainesville, FL 32609

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (a) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: N/A BLOCK: N/A SUBDIVISION: N/A PLATTED: N/A

PROPERTY ID #: 36-75-16-6435-10 ZONING: Residential/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 8.5 ACRES WATER SUPPLY: [  PRIVATE PUBLIC [ ] <2000GPD [ ] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / N ] DISTANCE TO SEWER: \_\_\_\_\_ FT

PROPERTY ADDRESS: 1965W MARINE GLENW FORT WHITE, FL 32038

DIRECTIONS TO PROPERTY: From 134 TURN ON SW RUM ISLAND TERRACE ROAD MAKES A SHARP CURVE GO STRAIGHT ON PRIVATE ROAD, MAKE LEFT ON SW MARINE GLENW  
HOUSE ON RIGHT

BUILDING INFORMATION

[  ] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>NEW RESIDENTIAL</u>	<u>1</u>	<u>312</u>	<u>BE 1/22/2010</u>
2	<u>EXISTING HOME</u>	<u>2</u>	<u>1,000</u>	<u>ORIGINAL ATTACHED</u>
3			<u>1,312</u>	
4				

[ ] Floor/Equipment Drains [ ] Other (specify) \_\_\_\_\_

SIGNATURE: William J. Cason

DATE: 11/26/2011

2  
2700  
462.70

Prepared by  
Charlotte Dixon, an employee of  
First American Title Insurance Company  
2632 Northwest 43rd Street, Building C  
Gainesville, Florida 32606  
(352) 336-0440

In [REDACTED] Date: 01/19/2005 Time: 15:27  
Doc Stamp-Deed : 462.70  
*MK* DC, P. Dewitt Cason, Columbia County B: 1035 P: 2357

Return to: Grantee

File No.: 1094-666370

### **WARRANTY DEED**

This indenture made on **December 28**, 2004 A.D., by

**Douglas W. Cochran, Sr., also known as Douglas W. Cochran and Dawn W. Cochran, husband and wife**

whose address is: **4521 Kings Road, St. Leonard, MD**  
hereinafter called the "grantor", to

**Mary S. Lewis and Carol L. Payne**, as joint tenants with right of survivorship *ced*

whose address is: **649 Rolling Hill Drive, Sebastian, FL 32958**  
hereinafter called the "grantee":

(Which terms "Grantor" and "Grantee" shall include singular or plural, corporation or individual, and either sex, and shall include heirs, legal representatives, successors and assigns of the same)

**Witnesseth**, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in **Columbia County, Florida**, to-wit:

**"See Exhibit A attached hereto and by this reference made a part hereof."**

Parcel Identification Number: **36-7S-[REDACTED]**

**Subject to** all reservations, covenants, conditions, restrictions and easements of record and to all applicable zoning ordinances and/or restrictions imposed by governmental authorities, if any.

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

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

And the grantor hereby covenants with said grantees that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor 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 31st of 2004.

In Witness Whereof, the grantor has hereunto set their hand(s) and seal(s) the day and year first above written.

Douglas W. Cochran Sr.  
Douglas W. Cochran Sr.  
a/k/a Douglas W. Cochran

Dawn W. Cochran  
Dawn W. Cochran

Signed, sealed and delivered in our presence:

Angel Nuxley  
Witness Signature

Tracy L. Parrish  
Witness Signature

Print Name: Angel Nuxley

Print Name: Tracy L Parrish

State of **Maryland**

County of Charles

The Foregoing Instrument Was Acknowledged before me on December 28<sup>th</sup>, 2004, by **Douglas W. Cochran, Sr., a/k/a Douglas W. Cochran and Dawn W. Cochran, husband and wife** who is/are personally known to me or who has/have produced a valid driver's license as identification.

Tracy L. Parrish  
NOTARY PUBLIC

Tracy L. Parrish  
Notary Print Name  
My Commission Expires: 10/1/06

PTC0000181

Exhibit "A"

**A PART OF THE NORTHWEST 1/4 OF SECTION 36, TOWNSHIP 7 SOUTH, RANGE 16 EAST, MORE PARTICULARLY DESCRIBED AS FOLLOWS:**

**COMMENCE AT THE NORTHWEST CORNER OF SAID NORTHWEST 1/4 AND RUN SOUTH 01 DEG. 06 MIN. 32 SEC. EAST, ALONG THE WEST LINE THEREOF, 1831.04 FEET FOR A POINT OF BEGINNING; THENCE NORTH 88 DEG. 54 MIN. 35 SEC. EAST, 1310.15 FEET; THENCE SOUTH 01 DEG. 05 MIN. 56 SEC. EAST, 366.08 FEET; THENCE SOUTH 88 DEG. 54 MIN. 35 SEC. WEST, 1310.05 FEET TO A POINT ON THE WEST LINE OF SAID NORTHWEST 1/4; THENCE NORTH 01 DG. 06 MIN. 32 SEC. WEST, 366.08 FEET TO THE POINT OF BEGINNING. COLUMBIA COUNTY, FLORIDA.**

**TOGETHER WITH AN EASEMENT FOR INGRESS, EGRESS AND PUBLIC UTILITIES; TOGETHER WITH RIGHT OF INGRESS AND EGRESS OVER AND ACROSS A 60 FOOT STRIP OF LAND LYING ADJACENT TO AND EAST OF THE FOLLOWING DESCRIBED LINE; COMMENCE AT THE NORTHWEST CORNER OF SECTION 36, TOWNSHIP 7 SOUTH, RANGE 16 EAST AND RUN SOUTH 01 DEG. 06 MIN. 32 SEC. EAST, ALONG THE WEST LINE THEREOF, 1268.76 FEET FOR A POINT OF BEGINNING; THENCE CONTINUE SOUTH 01 DEG. 06 MIN. 32 SEC. EAST, 592.27 FEET TO THE POINT OF TERMINATION OF SAID EASEMENT AT THE NORTHWEST CORNER OF THE HEREIN CONVEYED LOT 4.**

**LESS AND EXCEPT EXISTING ROAD RIGHT OF WAY IN THE NORTHWEST CORNER OF SAID 60 FOOT EASEMENT**

Inst:2005001240 Date:01/19/2005 Time:15:27

Doc Stamp-Deed : 462.70

DC, P. DeWitt Cason, Columbia County B:1035 P:2359

# Columbia County Property Appraiser

DB Last Updated: 1/6/2011

2010 Tax Year

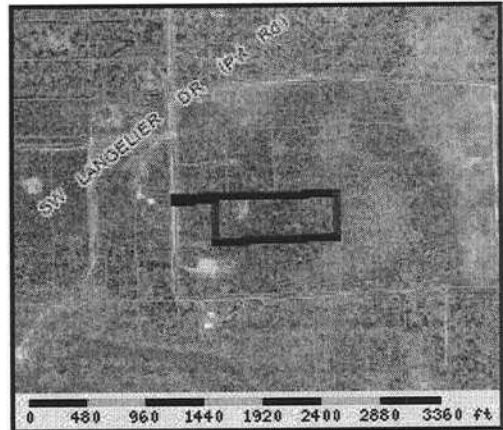
Parcel: 36-7S-16-04351-104

<< Next Lower Parcel    Next Higher Parcel >>

Search Result: 1 of 1

## Owner & Property Info

<b>Owner's Name</b>	LEWIS MARY S &		
<b>Mailing Address</b>	CAROL L PAYNE (JTWRs) 196 SW MARINE GLEN FT WHITE, FL 32038		
<b>Site Address</b>	196 SW MARINE GLN		
<b>Use Desc. (code)</b>	SINGLE FAM (000100)		
<b>Tax District</b>	3 (County)	<b>Neighborhood</b>	36716
<b>Land Area</b>	8.500 ACRES	<b>Market Area</b>	02
<b>Description</b>	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
COMM NW COR OF NW1/4, RUN S 1831.03 FT FOR POB, RUN E 1310.15 FT, S 366.08 FT, W 1310.05 FT, N 366.08 FT TO POB EX 2.50 AC QC 1077-006. (AKA PART LOT 4) ORB 794-792, WD 1035-2354, WD 1035-2357.			



## Property & Assessment Values

2010 Certified Values		
<b>Mkt Land Value</b>	cnt: (0)	\$41,697.00
<b>Ag Land Value</b>	cnt: (1)	\$0.00
<b>Building Value</b>	cnt: (1)	\$70,476.00
<b>XFOB Value</b>	cnt: (0)	\$0.00
<b>Total Appraised Value</b>		\$112,173.00
<b>Just Value</b>		\$112,173.00
<b>Class Value</b>		\$0.00
<b>Assessed Value</b>		\$97,813.00
<b>Exempt Value</b>	(code: HX SX)	\$75,000.00
<b>Total Taxable Value</b>	Cnty: \$22,813 Other: \$47,813   Schl:	\$72,813

2011 Working Values
<p><b>NOTE:</b> 2011 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.</p> <input type="button" value="Show Working Values"/>

## Sales History

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
12/28/2004	1035/2357	WD	V	Q		\$66,100.00
8/10/1994	794/792	WD	V	Q		\$22,200.00

## Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	2008	(32)	1000	1216	\$66,857.00
<b>Note:</b> All S.F. calculations are based on exterior building dimensions.						

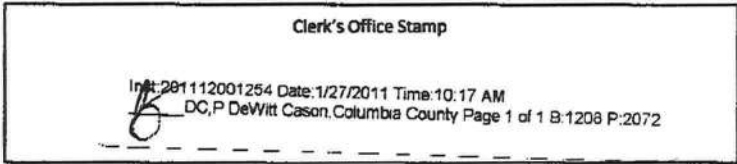
## Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

## Land Breakdown

--	--	--	--	--	--	--

NOTICE OF COMMENCEMENT



Tax Parcel Identification Number:

36-75-16-04351-104

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

- 1. Description of property (legal description): Lot 4
a) Street (job) Address: 196 SW Marine Blvd, Fort White, FL, 32038
2. General description of Improvements: Addition on Real of Existing home
3. Owner Information
a) Name and address: MARY LEWIS
b) Name and address of fee simple titleholder (if other than owner) 196 SW Marine Blvd, Fort White, FL, 32038
c) Interest in property owner
4. Contractor Information
a) Name and address: CASON BUILDERS INC 20223 NEB STREET, Gainesville, FL, 32609
b) Telephone No.: 352-283-3542 Fax No. (Opt.)
5. Surety Information
a) Name and address:
b) Amount of Bond: N/A
c) Telephone No.: Fax No. (Opt.)
6. Lender
a) Name and address: N/A
b) Phone No.
7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served:
a) Name and address: MARY LEWIS 196 SW Marine Blvd, Fort White, FL, 32038
b) Telephone No.: 386-454-5713 Fax No. (Opt.)
8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:
a) Name and address: N/A
b) Telephone No.: Fax No. (Opt.)
9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified):

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

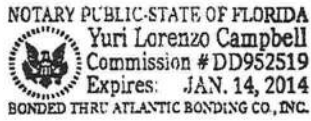
STATE OF FLORIDA
COUNTY OF COLUMBIA

10. Mary Sue Lewis Attorney in Fact
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager
Mary Sue Lewis/Carol Payne
Printed Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 25 day of January, 20 11, by:
Lorenzo as Officer (type of authority, e.g. officer, trustee, attorney fact) for Mary Sue Lewis / Carol Lewis Payne (name of party on behalf of whom instrument was executed).

Personally Known OR Produced Identification Type FL Driver License

Notary Signature Notary Stamp or Seal:
-AND-



11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Signature of Natural Person Signing (in line #10 above.)



**COLUMBIA COUNTY BUILDING DEPARTMENT  
RESIDENTIAL CHECK LIST REQUIREMENTS**

**MINIMUM PLAN REQUIREMENTS FOR THE  
FLORIDA BUILDING CODE RESIDENTIAL 2007  
ONE (1) AND TWO (2) FAMILY DWELLINGS**

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

**ALL BUILDING PLANS MUST INDICATE COMPLIANCE with the Current 2007 FLORIDA BUILDING CODES RESIDENTIAL. ALL PLANS OR DRAWINGS SHALL PROVIDE 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 SPEEDS ARE PER FIGURE R301.2(4) of the FLORIDA BUILDING CODES RESIDENTIAL (Florida Wind speed map) SHALL BE USED.**

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

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

<b>GENERAL REQUIREMENTS:</b>	<b>Items to Include- Each Box shall be Circled as Applicable</b>
<b>APPLICANT - PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</b>	

		Yes	No	N/A
1	Two (2) complete sets of plans containing the following:	✓		
2	All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void	✓		
3	Condition space (Sq. Ft.)	XXXXXX	XXXXXX	XXXX
	1,000			
	Total (Sq. Ft.) under roof			
	1,216			

Designers name and signature shall be on all documents and a licensed architect or engineer, signature and official embossed seal shall be affixed to the plans and documents as per the FLORIDA BUILDING CODES RESIDENTIAL R101.2.1

**Site Plan** information including:

4	Dimensions of lot or parcel of land	✓		
5	Dimensions of all building set backs	✓		
6	Location of all other structures (include square footage of structures) on parcel, existing or proposed well and septic tank and all utility easements.	✓		
7	Provide a full legal description of property.	✓		

**Wind-load Engineering Summary, calculations and any details required**

<b>GENERAL REQUIREMENTS: APPLICANT - PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</b>		<b>Items to Include- Each Box shall be Circled as Applicable</b>		
<b>8</b>	<b>Plans or specifications must show compliance with FBCR Chapter 3</b>	<b>XXXX</b>	<b>YYYY</b>	<b>ZZZZ</b>
		<b>YES</b>	<b>NO</b>	<b>N/A</b>
9	Basic wind speed (3-second gust), miles per hour	✓		
10	(Wind exposure - if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated)	✓		
11	Wind importance factor and nature of occupancy	✓		
12	The applicable internal pressure coefficient. Components and Cladding	✓		
13	The design wind pressure in terms of psf (kN/m <sup>2</sup> ), to be used for the design of exterior component, cladding materials not specifically designed by the registered design professional.	✓		

**Elevations Drawing including:**

14	All side views of the structure	✓		
15	Roof pitch	✓		
16	Overhang dimensions and detail with attic ventilation	✓		
17	Location, size and height above roof of chimneys	✓		
18	Location and size of skylights with Florida Product Approval	N/A		
18	Number of stories	✓		
20A	Building height from the established grade to the roofs highest peak	✓		

**Floor Plan including:**

20	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	✓		
21	Raised floor surfaces located more than 30 inches above the floor or grade	✓		
22	All exterior and interior shear walls indicated	✓		
23	Shear wall opening shown (Windows, Doors and Garage doors)	✓		
24	Emergency escape and rescue opening shown in each bedroom (net clear opening shown)	✓		
25	Safety glazing of glass where needed	✓		
26	Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 of FBCR)	N/A		
27	Stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails (see FBCR SECTION 311)	N/A		
28	Identify accessibility of bathroom (see FBCR SECTION 322)	✓		

**All materials placed within opening or onto/into exterior walls, soffits or roofs shall have Florida product approval number and mfg. installation information submitted with the plan (see Florida product approval form)**

**GENERAL REQUIREMENTS:**  
**APPLICANT - PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL**

Items to Include-  
 Each Box shall be  
 Circled as  
 Applicable

**FBCR 403: Foundation Plans**

		YES	NO	N/A
29	Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing.	✓		
30	All posts and/or column footing including size and reinforcing	✓		
31	Any special support required by soil analysis such as piling.	✓		
32	Assumed load-bearing value of soil <span style="float: right;">Pound Per Square Foot</span>	✓		
33	Location of horizontal and vertical steel, for foundation or walls (include # size and type)	✓		

**FBCR 506: CONCRETE SLAB ON GRADE**

34	Show Vapor retarder (6mil. Polyethylene with joints lapped 6 inches and sealed)	N/A		
35	Show control joints, synthetic fiber reinforcement or welded fire fabric reinforcement and Supports	N/A		

**FBCR 320: PROTECTION AGAINST TERMITES**

36	Indicate on the foundation plan if soil treatment is used for subterranean termite prevention or submit other approved termite protection methods. Protection shall be provided by registered termiticides	✓		
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**FBCR 606: Masonry Walls and Stem walls (load bearing & shear Walls)**

37	Show all materials making up walls, wall height, and Block size, mortar type	✓		
38	Show all Lintel sizes, type, spans and tie-beam sizes and spacing of reinforcement	✓		

**Metal frame shear wall and roof systems shall be designed, signed and sealed by Florida Prof. Engineer or Architect**

**Floor Framing System: First and/or second story**

39	Floor truss package shall including layout and details, signed and sealed by Florida Registered Professional Engineer	✓		
40	Show conventional floor joist type, size, span, spacing and attachment to load bearing walls, stem walls and/or piers	✓		
41	Girder type, size and spacing to load bearing walls, stem wall and/or piers	✓		
42	Attachment of joist to girder	✓		
43	Wind load requirements where applicable	✓		
44	Show required under-floor crawl space	✓		
45	Show required amount of ventilation opening for under-floor spaces	✓		
46	Show required covering of ventilation opening	✓		
47	Show the required access opening to access to under-floor spaces	✓		
	Show the sub-floor structural panel sheathing type, thickness and fastener schedule on the edges &	✓		

48	intermediate of the areas structural panel sheathing	<input checked="" type="checkbox"/>		
49	Show Draftstopping, Fire caulking and Fire blocking	<input checked="" type="checkbox"/>		
50	Show fireproofing requirements for garages attached to living spaces, per FBCR section 309	<input checked="" type="checkbox"/>		
51	Provide live and dead load rating of floor framing systems (psf).	<input checked="" type="checkbox"/>		

**FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION**

<b>GENERAL REQUIREMENTS: APPLICANT - PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</b>		<b>Items to Include- Each Box shall be Circled as Applicable</b>		
		YES	NO	N/A
52	Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls	<input checked="" type="checkbox"/>		
53	Fastener schedule for structural members per table FBCR 602.3 are to be shown	<input checked="" type="checkbox"/>		
54	Show wood structural panel's sheathing attachment to studs, joist, trusses, rafters and structural members, showing fastener schedule attachment on the edges & intermediate of the areas structural panel sheathing	<input checked="" type="checkbox"/>		
55	Show all required connectors with a max uplift rating and required number of connectors and oc spacing for continuous connection of structural walls to foundation and roof trusses or rafter systems	<input checked="" type="checkbox"/>		
56	Show sizes, type, span lengths and required number of support jack studs, king studs for shear wall opening and girder or header per FBCR Table 502.5 (1)	<input checked="" type="checkbox"/>		
57	Indicate where pressure treated wood will be placed	<input checked="" type="checkbox"/>		
58	Show all wall structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing edges & intermediate areas	<input checked="" type="checkbox"/>		
59	A detail showing gable truss bracing, wall balloon framing details or/ and wall hinge bracing detail	<input checked="" type="checkbox"/>		

**FBCR :ROOF SYSTEMS:**

60	Truss design drawing shall meet section FBCR 802.10 Wood trusses	<input checked="" type="checkbox"/>		
61	Include a layout and truss details, signed and sealed by Florida Professional Engineer	<input checked="" type="checkbox"/>		
62	Show types of connector's assemblies' and resistance uplift rating for all trusses and rafters	<input checked="" type="checkbox"/>		
63	Show gable ends with rake beams showing reinforcement or gable truss and wall bracing details	<input checked="" type="checkbox"/>		
64	Provide dead load rating of trusses	<input checked="" type="checkbox"/>		

**FBCR 802:Conventional Roof Framing Layout**

65	Rafter and ridge beams sizes, span, species and spacing	<input checked="" type="checkbox"/>		
66	Connectors to wall assemblies' include assemblies' resistance to uplift rating	<input checked="" type="checkbox"/>		
67	Valley framing and support details	<input checked="" type="checkbox"/>		
68	Provide dead load rating of rafter system	<input checked="" type="checkbox"/>		

**FBCR Table 602.3(2) & FBCR 803 ROOF SHEATHING**

69	Include all materials which will make up the roof decking, identification of structural panel sheathing, grade, thickness	<input checked="" type="checkbox"/>		
70	Show fastener Size and schedule for structural panel sheathing on the edges & intermediate areas	<input checked="" type="checkbox"/>		

**FBCR ROOF ASSEMBLIES FRC Chapter 9**

71	Include all materials which will make up the roof assemblies covering	<input checked="" type="checkbox"/>		
72	Submit Florida Product Approval numbers for each component of the roof assemblies covering	<input checked="" type="checkbox"/>		

**FBCR Chapter 11 Energy Efficiency Code for residential building**

Residential construction shall comply with this code by using the following compliance methods in the FBCR chapter 11 Residential buildings compliance methods. *Two of the required forms are to be submitted, showing dimensions condition area equal to the total condition living space area*

GENERAL REQUIREMENTS: APPLICANT - PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
73	Show the insulation R value for the following areas of the structure	<input checked="" type="checkbox"/>		
74	Attic space	<input checked="" type="checkbox"/>		
75	Exterior wall cavity	<input checked="" type="checkbox"/>		
76	Crawl space	<input checked="" type="checkbox"/>		

**HVAC information**

77	Submit two copies of a Manual J sizing equipment or equivalent computation study	<input checked="" type="checkbox"/>		
78	Exhaust fans locations in bathrooms	<input checked="" type="checkbox"/>		
79	Show clothes dryer route and total run of exhaust duct	<input checked="" type="checkbox"/>		

**Plumbing Fixture layout shown**

80	All fixtures waste water lines shall be shown on the foundation plan	<input checked="" type="checkbox"/>		
81	Show the location of water heater	<input checked="" type="checkbox"/>		

**Private Potable Water**

82	Pump motor horse power	N/A		
83	Reservoir pressure tank gallon capacity	N/A		
84	Rating of cycle stop valve if used	N/A		

**Electrical layout shown including**

85	Switches, outlets/receptacles, lighting and all required GFCI outlets identified	<input checked="" type="checkbox"/>		
86	Ceiling fans	<input checked="" type="checkbox"/>		
87	Smoke detectors & Carbon dioxide detectors	<input checked="" type="checkbox"/>		
88	Service panel, sub-panel, location(s) and total ampere ratings	<input checked="" type="checkbox"/>		
89	On the electrical plans identify the electrical service overcurrent protection device for the main electrical service. This device shall be installed on the exterior of structures to serve as a disconnecting means for the utility company electrical service. Conductors used from the exterior disconnecting means to a panel or sub panel shall have four-wire conductors, of which one conductor shall be used as an equipment ground. Indicate if the utility company service entrance cable will be of the overhead or underground type.	<input checked="" type="checkbox"/>		

90	Appliances and HVAC equipment and disconnects	<input checked="" type="checkbox"/>		
91	Arc Fault Circuits (AFCI) in bedrooms	<input checked="" type="checkbox"/>		

**Disclosure Statement for Owner Builders** If you as the applicant will be acting as an owner builder under section 489.103(7) of the Florida Statutes, submit the required owner builder disclosure statement form.

**Notice Of Commencement**

A notice of commencement form recorded in the Columbia County Clerk Office is required to be filed with the building department Before Any Inspections can be preformed.

<b>GENERAL REQUIREMENTS:</b> <b>APPLICANT- PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</b>	<b>Items to Include-</b> <b>Each Box shall be</b> <b>Circled as</b> <b>Applicable.</b>
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**THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS**

		YES	NO	N/A
92	<b>Building Permit Application</b> A current Building Permit Application form is to be completed and submitted for all residential projects	<input checked="" type="checkbox"/>		
93	<b>Parcel Number</b> The parcel number (Tax ID number) from the Property Appraiser (386) 758-1084 is required. A copy of property deed is also requested	<input checked="" type="checkbox"/>		
94	<b>Environmental Health Permit or Sewer Tap Approval</b> A copy of a approved Columbia County Environmental Health (386) 758-1058			
95	<b>City of Lake City</b> A permit showing an approved waste water sewer tap	<input checked="" type="checkbox"/>		
96	<b>Toilet facilities shall be provided for all construction sites</b>	<input checked="" type="checkbox"/>		
97	<b>Town of Fort White</b> (386) 497-2321 If the parcel in the application for building permit is within the Corporate city limits of Fort White an approval land use development letter issued by the Town of Fort is required to be submitted with the application for a building permit.			N/A
98	<b>Flood Information:</b> All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting a 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 8.5.2 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 8.5.3 of the Columbia County Land Development Regulations	<input checked="" type="checkbox"/>		
99	<b>CERTIFIED FINISHED FLOOR ELEVATIONS</b> will be required on any project where the base flood elevation (100 year flood) has been established	<input checked="" type="checkbox"/>		
100	A development permit will also be required. Development permit cost is \$50.00			N/A
101	<b>Driveway Connection:</b> 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.			N/A
102	<b>911 Address:</b> If the project is located in an area where a 911 address has not been issued, then application for a 911 address must be applied for and received through the Columbia County Emergency Management Office of 911 Addressing Department (386) 758-1125	<input checked="" type="checkbox"/>		

**PRODUCT APPROVAL SPECIFICATION SHEET**Location: 176 SW MARSH GLEESProject Name: CASON BUILDERS INC

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and the product approval number(s) on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit on or after April 1, 2004. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. More information about statewide product approval can be obtained at [www.floridabuilding.org](http://www.floridabuilding.org)

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
<b>A. EXTERIOR DOORS</b>			
1. Swinging	Thermair	PRE HUNG DOOR SYSTEMS	FL#7730
2. Sliding			
3. Sectional			
4. Roll up			
5. Automatic			
6. Other			
<b>B. WINDOWS</b>			
1. Single hung	MT WINDOWS	SINGLE HUNG	FI 12250-R4
2. Horizontal Slider			
3. Casement			
4. Double Hung			
5. Fixed			
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11. Dual Action			
12. Other			
<b>C. PANEL WALL</b>			
1. Siding	HARDIE BOARD	1/2" SIDING	FI 889
2. Soffits			
3. EIFS			
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block			
8. Membrane			
9. Greenhouse			
10. Other			
<b>D. ROOFING PRODUCTS</b>			
1. Asphalt Shingles			
2. Underlayments			
3. Roofing Fasteners			
4. Non-structural Metal Rf	METAL SALES	5V CRIMP	FI# 9107-R1
5. Built-Up Roofing			
6. Modified Bitumen			
7. Single Ply Roofing Sys			
8. Roofing Tiles			
9. Roofing Insulation			
10. Waterproofing			
11. Wood shingles /shakes			
12. Roofing Slate			

Category/Subcategory (cont.)	Manufacturer	Product Description	Approval Number(s)
13. Liquid Applied Roof Sys			
14. Cements-Adhesives - Coatings			
15. Roof Tile Adhesive			
16. Spray Applied Polyurethane Roof			
17. Other			
<b>E. SHUTTERS</b>	<i>N/A</i>		
1. Accordion			
2. Bahama			
3. Storm Panels			
4. Colonial			
5. Roll-up			
6. Equipment			
7. Others			
<b>F. SKYLIGHTS</b>			
1. Skylight	<i>N/A</i>		
2. Other			
<b>G. STRUCTURAL COMPONENTS</b>	<i>see plan N/A</i>		
1. Wood connector/anchor			
2. Truss plates			
3. Engineered lumber			
4. Railing			
5. Coolers-freezers			
6. Concrete Admixtures			
7. Material			
8. Insulation Forms			
9. Plastics			
10. Deck-Roof			
11. Wall			
12. Sheds			
13. Other			
<b>H. NEW EXTERIOR ENVELOPE PRODUCTS</b>			
1.			
2.			

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) the performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.

I understand these products may have to be removed if approval cannot be demonstrated during inspection

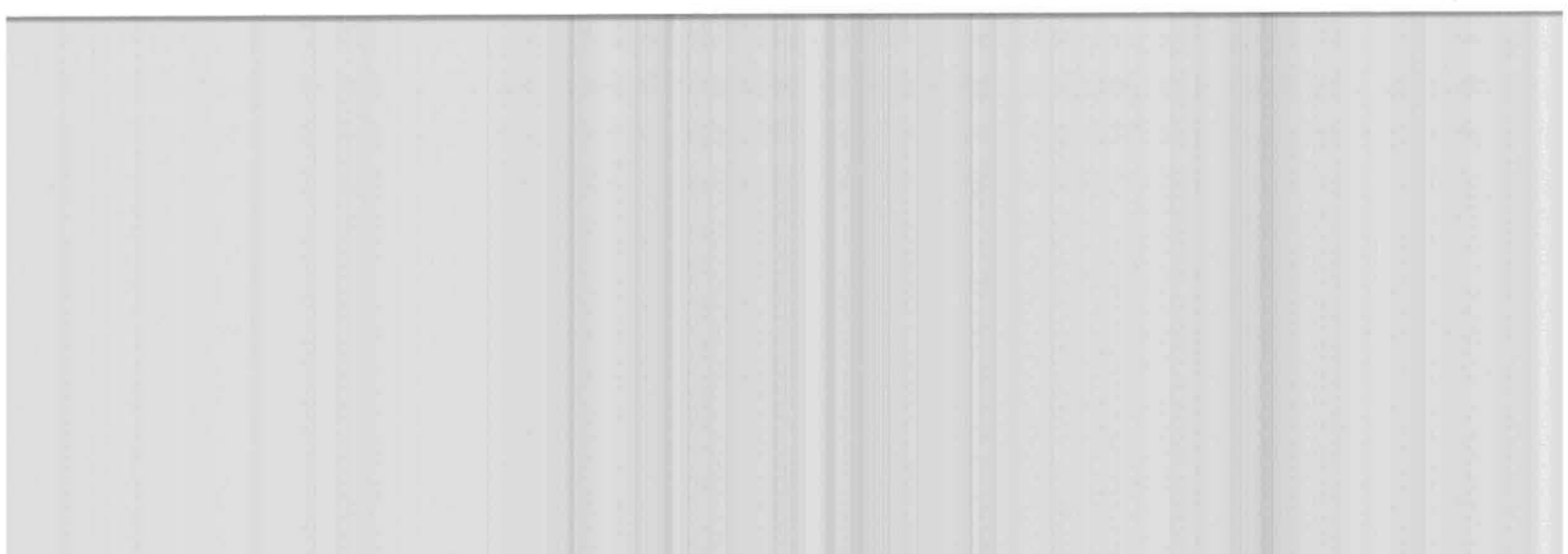
\_\_\_\_\_

\_\_\_\_\_

*William J. Cason*  
 Contractor or Contractor's Authorized Agent Signature

William J Cason 1/26/2011  
 Print Name Date

Permit # (FOR STAFF USE ONLY)



**Work Shall Be:**

**Section 105.4.1.3: Work shall be considered to be in active progress when the permit has received an approved inspection within 180 days. This provision shall not be applicable in case of civil commotion or strike or when the building work is halted due directly to judicial injunction, order or similar process.**

**The Fee:**

**Section 105.4.1.4: The fee for renewal reissuance and extension of a permit shall be set forth by the administrative authority.**

**When the submitted application is approved for permitting the applicant will be notified by phone as to the date and time a building permit will be prepared and issued by the Columbia County Building & Zoning Department**

**Section R101.2.1 of the Florida Building Code Residential:**

**The provisions of Chapter 1, Florida Building Code, Building shall govern the administration and enforcement of the Florida Building Code, Residential.**

**Section 105 of the Florida Building Code defines the:**

**Time limitation of application.**

**An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.**

**Single-family residential dwelling.**

**Section 105.3.4 A building permit for a single-family residential dwelling must be issued within 30 working days of application therefor unless unusual circumstances require a longer time for processing the application or unless the permit application fails to satisfy the Florida Building Code or the enforcing agency's laws or ordinances.**

**Permit intent.**

**Section 105.4.1: A permit issued shall be constructed to be a license to proceed with the work and not as authority to violate, cancel, alter or set aside any of the provisions of the technical codes, nor shall issuance of a permit prevent the building official from thereafter requiring a correction of errors in plans, construction or violations of this code. Every permit issued shall become invalid unless the work authorized by such permit is commenced within six months after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of six months after the time the work is commenced.**

**If work has commenced.**

**Section 105.4.1.1: If work has commenced and the permit is revoked, becomes null and void, or expires because of lack of progress or abandonment, a new permit covering the proposed construction shall be obtained before proceeding with the work.**

**New Permit.**

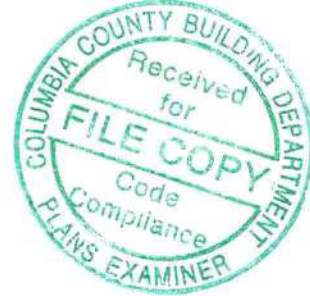
**Section 105.4.1.2: If a new permit is not obtained within 180 days from the date the initial permit became null and void, the building official is authorized to require that any work which has been commenced or completed be removed from the building site. Alternately, a new permit may be issued on application, providing the work in place and required to complete the structure meets all applicable regulations in effect at the time the initial permit became null and void and any regulations which may have become effective between the date of expiration and the date of issuance of the new permit.**

# Cason Builders Inc.

20223 NE 6<sup>th</sup> Street  
Gainesville, FL, 32609  
Phone (352)-283-3542  
Fax (352) 485-2362

E-mail [casonbuilders@windstream.net](mailto:casonbuilders@windstream.net)  
[www.casonbuildersinc.com](http://www.casonbuildersinc.com)  
License #CB-C060151

January 20, 2011  
196 SW Marine Glen  
Fort White, FL, 32038  
Parcel #36-7S-16-04351-104



## Scope of Work

Supply all materials and labor for the following scope of work:  
Bedroom, bathroom, and screen porch addition on rear of the existing house:

- ❖ Plans, engineering, and permits.
- ❖ Termite treatment.
- ❖ Septic tank drain field modification.
- ❖ Temporary toilet.
- ❖ Site work.
- ❖ Foundation and concrete work.
- ❖ Floor framing, wall framing, roof framing.
- ❖ Metal roofing.
- ❖ Aluminum soffit.
- ❖ Windows and exterior door.
- ❖ AC / Heat extend new ducts from the existing unit for the closet and bathroom and install 9,000 btu mini split heat pump system. Install exhaust fan in bathroom.
- ❖ Plumbing for addition.
- ❖ Electrical for addition.
- ❖ Security pre-wire.
- ❖ Insulation.
- ❖ Sheet rock and plaster interior walls, ceiling, porch ceiling.
- ❖ Wood finished vanity cabinet with marble counter top.
- ❖ Closet shelving, medicine cabinet, vanity mirror, and shower door.
- ❖ Tile floors in bath room with tiled shower.
- ❖ Interior doors, trim, and hardware.
- ❖ Painting
- ❖ Wood flooring throughout.
- ❖ Dumpsters and clean up all construction debris.
- ❖ Final grading and repair landscape.
- ❖ Final cleaning.

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER PAYNE RES: Demo CONTRACTOR CASOW BUILDERS INC PHONE 352-283-3542  
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

<i>OK</i> ELECTRICAL 583 OK	Print Name <u>Custom Electric</u> License #: <u>EC000384</u> <u>Kurt Swindel</u>	Signature _____ Phone #: _____
<i>OK</i> MECHANICAL/ A/C B OK	Print Name <u>Hogle's Heating &amp; Air</u> License #: <u>CAC058124</u>	Signature <u>See Attached</u> Phone #: _____
<i>OK</i> PLUMBING/ GAS 767	Print Name <u>Coleman's Plumbers</u> License #: <u>CFC1425624</u>	Signature <u>See Attached</u> Phone #: _____
<i>OK</i> ROOFING 605	Print Name <u>TRACY McDONALD Inc</u> License #: <u>CC0057911</u>	Signature <u>See Attached</u> Phone #: _____
SHEET METAL	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____

2-3-11  
Liability

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
<i>OK</i> MASON	383	CASOW BUILDERS INC	<u>[Signature]</u>
CONCRETE FINISHER	CB-C06151	CASOW BUILDERS INC	
<i>OK</i> FRAMING 954	661505970	Phil Evans	<u>See Attached</u>
INSULATION	CB-C06151	CASOW BUILDERS INC	
STUCCO	N/A		
DRYWALL	CB-C06151	CASOW BUILDERS INC	
PLASTER	CB-C06151	CASOW BUILDERS INC	
CABINET INSTALLER	CB-C06151	CASOW BUILDERS INC	
PAINTING	CB-C06151	CASOW BUILDERS INC	
ACOUSTICAL CEILING	N/A		
GLASS	N/A		
CERAMIC TILE	CB-C06151	CASOW BUILDERS INC	
FLOOR COVERING	CB-C06151	CASOW BUILDERS INC	
<i>OK</i> ALUM/VINYL SIDING	312	Paul Phinney	<u>See Attached</u>
GARAGE DOOR	N/A		
METAL BLDG ERECTOR	N/A		

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

SUBCONTRACTOR VERIFICATION FORM

CB-0060151

APPLICATION NUMBER \_\_\_\_\_

CONTRACTOR CASON BUILDERS INC

PHONE 352-283-3542

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

906  
900

<b>ELECTRICAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>MECHANICAL/ A/C</b> <u>B</u>	Print Name <u>Hugh's Heating &amp; Air</u> License #: <u>CA0058124</u>	Signature <u>[Signature]</u> Phone #: _____
<b>PLUMBING/ GAS</b> <u>767</u>	Print Name <u>COLEMAN'S Plumbers</u> License #: <u>CFC1425624</u>	Signature <u>Paul R...</u> Phone #: <u>352-472-4114</u>
<b>ROOFING</b> <u>605</u>	Print Name <u>TRACY S. McDONALD INC.</u> License #: <u>CC057914</u>	Signature <u>[Signature]</u> Phone #: <u>(352) 213 5287</u>
<b>SHEET METAL</b> <u>N/A</u>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>FIRE SYSTEM/ SPRINKLER</b> <u>N/A</u>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SOLAR</b> <u>N/A</u>	Print Name _____ License #: _____	Signature _____ Phone #: _____

906

ok

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING	<u>954</u>	<u>PHIL EVANS</u>	<u>[Signature]</u>
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER	<u>CB-0060151</u>	<u>CASON BUILDERS INC</u>	<u>[Signature]</u>
PAINTING			
ACOUSTICAL CEILING	<u>N/A</u>		
GLASS	<u>N/A</u>		
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING	<u>312</u>	<u>Paul Phinney</u>	<u>[Signature]</u>
GARAGE DOOR	<u>N/A</u>		
METAL BLDG ERECTOR	<u>N/A</u>		

F. S. 440.103 Building permits; identification of minimum premium policy.—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

# CASON Builders

## SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1007-26 CONTRACTOR Wm CASON PHONE 352-283-3542

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

*Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.*

<b>ELECTRICAL</b> 583 ✓	Print Name <u>Kurt Swindel</u> License #: <u>EC-0002384</u>	Signature <u>[Signature]</u> Phone #: <u>352-262-0792</u>
<b>MECHANICAL/A/C</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>PLUMBING/GAS</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>ROOFING</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SHEET METAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>FIRE SYSTEM/SPRINKLER</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SOLAR</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

**F. S. 440.103 Building permits; identification of minimum premium policy.**—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Contractor Form: Subcontractor Form: 6/08

# COLUMBIA COUNTY OF FLORIDA

## 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 36-7S-16-04351-104 Building permit No. 000029172

Use Classification ADDITION/SFD Fire: 0.00

Permit Holder BILL CASON Waste: \_\_\_\_\_

Owner of Building MARY LEWIS/CAROL PAYNE-JTWS Total: 0.00

Location: 196 SW MARIN GLEN, FT. WHITE, FL 32038

Date: 04/29/2011

*Joey A.*

Building Inspector



POST IN A CONSPICUOUS PLACE  
(Business Places Only)