

DATE 11/12/2010

**Columbia County Building Permit**  
This Permit Must Be Prominently Posted on Premises During Construction

**PERMIT**  
**000029002**

APPLICANT HERMAN STILES PHONE 752-7319  
ADDRESS 4978 NW LASSIE BLACK ST WHITE SPRINGS FL 32096  
OWNER HERMAN STILES PHONE 752-7319  
ADDRESS 4978 NW LASSIE BLACK ST WHITE SPRINGS FL 32096  
CONTRACTOR OWNER BUILDER PHONE \_\_\_\_\_  
LOCATION OF PROPERTY 41 NORTH, R LASSIE BLACK RD, 1/4 MILE ON RIGHT

TYPE DEVELOPMENT REPAIR MH ESTIMATED COST OF CONSTRUCTION 0.00  
HEATED FLOOR AREA \_\_\_\_\_ TOTAL AREA \_\_\_\_\_ HEIGHT \_\_\_\_\_ STORIES \_\_\_\_\_  
FOUNDATION \_\_\_\_\_ WALLS \_\_\_\_\_ ROOF PITCH \_\_\_\_\_ FLOOR \_\_\_\_\_  
LAND USE & ZONING \_\_\_\_\_ MAX. HEIGHT \_\_\_\_\_  
Minimum Set Back Requirements: STREET-FRONT \_\_\_\_\_ REAR \_\_\_\_\_ SIDE \_\_\_\_\_  
NO. EX.D.U. 1 FLOOD ZONE NA DEVELOPMENT PERMIT NO. \_\_\_\_\_

PARCEL ID 16-2S-16-01631-025 SUBDIVISION SUWANNEE HIGHLANDS  
LOT 25 BLOCK \_\_\_\_\_ PHASE \_\_\_\_\_ UNIT \_\_\_\_\_ TOTAL ACRES 1.50

Herman R. Stiles  
Culvert Permit No. \_\_\_\_\_ Culvert Waiver \_\_\_\_\_ Contractor's License Number \_\_\_\_\_ Applicant/Owner/Contractor \_\_\_\_\_  
EXISTING 10-0490-M TC \_\_\_\_\_ N \_\_\_\_\_  
Driveway Connection \_\_\_\_\_ Septic Tank Number \_\_\_\_\_ LU & Zoning checked by \_\_\_\_\_ Approved for Issuance \_\_\_\_\_ New Resident \_\_\_\_\_

COMMENTS: FIRE DAMAGE TO MH, REPAIR OF THE DAMAGE AREA  
Check # or Cash NO CHARGE

**FOR BUILDING & ZONING DEPARTMENT ONLY**

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 \_\_\_\_\_ Insulation \_\_\_\_\_ 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 \_\_\_\_\_ Pool \_\_\_\_\_ date/app. by \_\_\_\_\_  
Permanent power \_\_\_\_\_ date/app. by \_\_\_\_\_ C.O. Final \_\_\_\_\_ date/app. by \_\_\_\_\_ Culvert \_\_\_\_\_ date/app. by \_\_\_\_\_  
Pump pole \_\_\_\_\_ date/app. by \_\_\_\_\_ Utility Pole \_\_\_\_\_ date/app. by \_\_\_\_\_ M/H tie downs, blocking, electricity and plumbing \_\_\_\_\_ date/app. by \_\_\_\_\_  
Reconnection \_\_\_\_\_ date/app. by \_\_\_\_\_ RV \_\_\_\_\_ date/app. by \_\_\_\_\_ Re-roof \_\_\_\_\_ date/app. by \_\_\_\_\_

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00  
MISC. FEES \$ 0.00 ZONING CERT. FEE \$ \_\_\_\_\_ FIRE FEE \$ 0.00 WASTE FEE \$ \_\_\_\_\_  
FLOOD DEVELOPMENT FEE \$ \_\_\_\_\_ FLOOD ZONE FEE \$ \_\_\_\_\_ CULVERT FEE \$ \_\_\_\_\_ **TOTAL FEE** 0.00  
INSPECTORS OFFICE Z. H. 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 RECEIVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECEIVED AN APPROVED INSPECTION WITHIN 180 DAYS OF THE PREVIOUS INSPECTION.

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

Columbia County Building Permit Application

Troy

**For Office Use Only** Application # 1011-20 Date Received 11-12-10 By LH Permit # 2900Z  
 Zoning Official N/A Date 11-12-10 Flood Zone \_\_\_\_\_ Land Use N/A Zoning N/A  
 FEMA Map # \_\_\_\_\_ Elevation \_\_\_\_\_ MFE \_\_\_\_\_ River \_\_\_\_\_ Plans Examiner J.C. Date 11-12-10  
 Comments Fire Damage MH - No fee (Scope of work per engineer)  
 NOC  EH  Deed or PA  Site Plan  State Road Info  Parent Parcel # \_\_\_\_\_  
 Dev Permit # \_\_\_\_\_  In Floodway  Letter of Auth. from Contractor  F W Comp. letter  
 IMPACT FEES: EMS \_\_\_\_\_ Fire \_\_\_\_\_ Corr \_\_\_\_\_ Road/Code \_\_\_\_\_  
 School \_\_\_\_\_ = TOTAL \_\_\_\_\_  Disclosure Statement on file.

Septic Permit No. 10-0490-M Fax \_\_\_\_\_

Name Authorized Person Signing Permit Ethel Stiles Phone 752-7319

Address 4978 NW Lassie Black St. ; White Springs, FL 32096

Owners Name Herman R. & Ethel W. Stiles Phone 386-752-7319

911 Address 4978 NW Lassie Black St., White Springs, FL 32096

Contractors Name Self Phone \_\_\_\_\_

Address 410 SE Rosewood Cr. LC, 32025

Fee Simple Owner Name & Address \_\_\_\_\_

Bonding Co. Name & Address \_\_\_\_\_

Architect/Engineer Name & Address Freeman Design Group P. 161 NW Madison

Mortgage Lenders Name & Address None

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

Property ID Number 16-25-16-01631-025 Estimated Cost of Construction \$20,000

Subdivision Name Suwannee Highlands Lot 25 Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase \_\_\_\_\_

Driving Directions Mon 41 to Lassie Black St. Turn R go 1/4 mile - on Right

Number of Existing Dwellings on Property 1

Construction of Repair Only MH Interior Total Acreage 1/2 Lot Size \_\_\_\_\_

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

Actual Distance of Structure from Property Lines - Front 122 Side 83 Side \_\_\_\_\_ Rear \_\_\_\_\_

Number of Stories 1 Heated Floor Area 1390 Total Floor Area 1670 Roof Pitch \_\_\_\_\_

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

**Columbia County Building Permit Application**

**TIME LIMITATIONS 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.

**TIME LIMITATIONS OF PERMITS:** 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 work is commenced. A valid permit receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous approved inspection.

**FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment:** According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects to make other legally required payments, the people who are owed money may look to your property for payment, even if you have paid your contractor in full. This means if a lien is filed against your property, it could be sold against your will to pay for labor, materials or other services which your contractor may have failed to pay.

**NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE:** YOU ARE HEREBY NOTIFIED as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes to lot grades that result in ponding of water, or other damage to roadway and other public infrastructure facilities caused by you or your contractor, subcontractors, agents or representatives in the construction and/or improvement of the building and lot for which this permit is issued. No certificate of occupancy will be issued until all corrective work to these public infrastructures and facilities has been corrected.

**WARNING TO OWNER:** YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU 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 WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

**OWNERS CERTIFICATION:** I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

**NOTICE TO OWNER:** There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. It may be to your advantage to check and see if your property is encumbered by any restrictions.

*Herman R. Stiles*  
*Ethel W. Stiles*

(Owners Must Sign All Applications Before Permit Issuance.)

Owners Signature

**\*\*OWNER BUILDERS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.**

**CONTRACTORS AFFIDAVIT:** By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.

*Owner Builder*

Contractor's Signature (Permitee)

Contractor's License Number \_\_\_\_\_  
Columbia County  
Competency Card Number \_\_\_\_\_

Affirmed under penalty of perjury to by the Contractor and subscribed before me this \_\_\_\_ day of \_\_\_\_\_ 20\_\_.

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

SEAL:

State of Florida Notary Signature (For the Contractor)



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

PERMIT NO. 982238  
DATE PAID: 11-1-10  
FEE PAID: 25.00  
RECEIPT #: 1589168

10-04400EM

APPLICATION FOR:

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

APPLICANT: Herman B. + Ethel W Stiles

AGENT: \_\_\_\_\_ TELEPHONE: 752-7319  
C 234-9026

MAILING ADDRESS: 410 SE Rosewood Cr

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) 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: 25 BLOCK: \_\_\_\_\_ SUBDIVISION: Swanne Highlands PLATTED: \_\_\_\_\_  
16-25-16 01631-025

PROPERTY ID #: 01620-003 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 1 1/2 ACRES WATER SUPPLY: [  PRIVATE PUBLIC [ ] ] <=2000GPD [ ] >2000GPD

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

PROPERTY ADDRESS: 4978 NW Lassie Black St.

DIRECTIONS TO PROPERTY: 41 N to Lassie Black St.

Turn R. go 1/2 mile. Large Pole Barn with MH under it.

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>MH with added rooms</u>	<u>2</u>	<u>1450</u> <u>1314</u>	<u>ORIGINAL ATTACHED</u>
2	_____	_____	_____	_____
3	_____	_____	_____	<u>Zonex</u>
4	_____	_____	_____	_____

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

SIGNATURE: Ethel W. Stiles DATE: 11-1-10



DEPARTMENT OF HEALTH

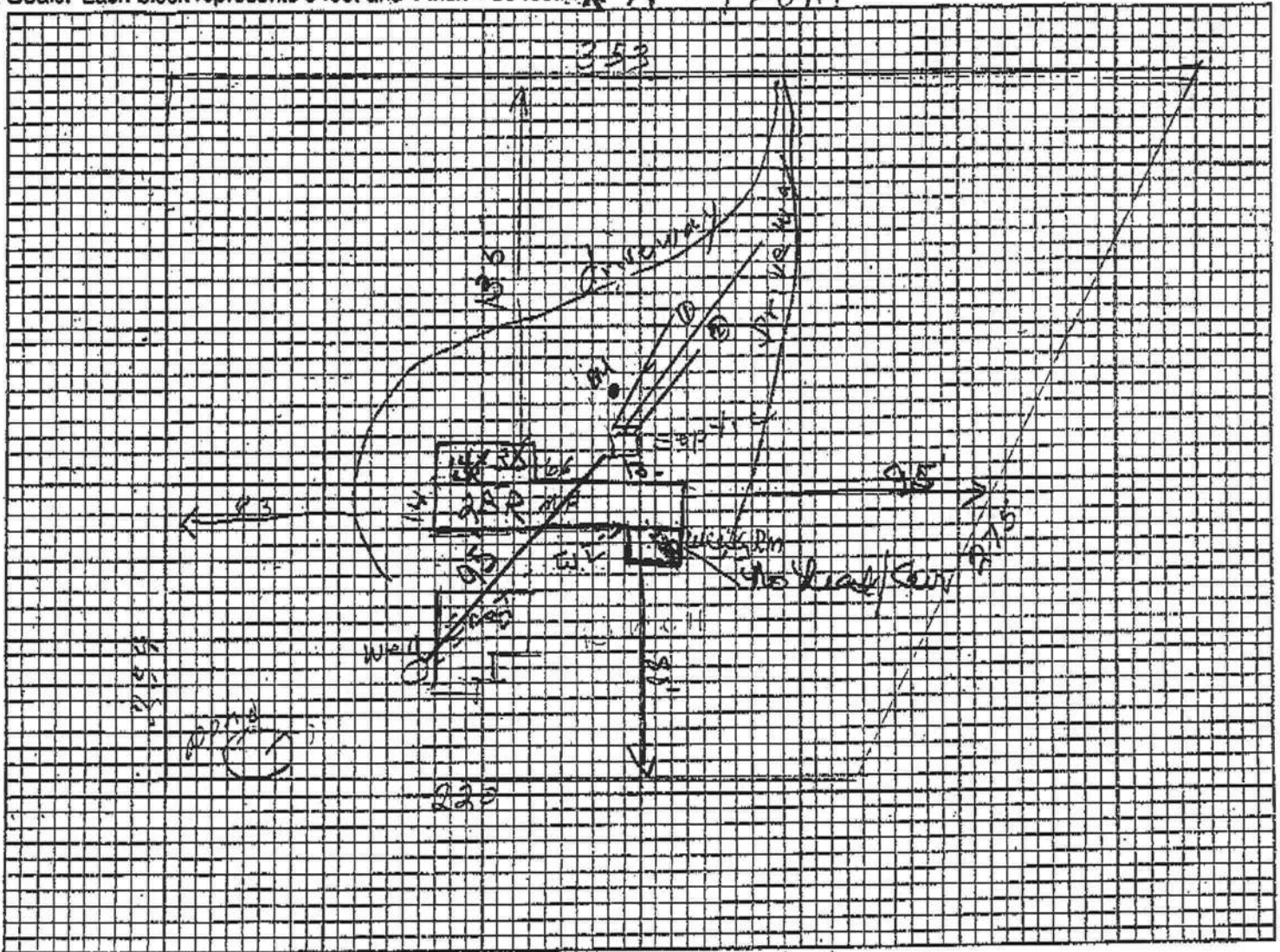
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

10-0490X M

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet. \* N - FRONT



Notes: Triangular piece added to Lot 25

Site Plan submitted by: Ethel M. Stiles

Signature

Owner

Title

Plan Approved [initials]

Not Approved

Date 1/17/10

By [Signature]

Columbia CHD County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Prepared by:  
Elaine R. Davis :  
American Title Services of Lake City, Inc.  
321 SW Main Boulevard, Suite 105  
Lake City, Florida 32025

File Number: 10-273

Inst:201012016887 Date:10/19/2010 Time:3:47 PM  
Doc Stamp-Deed:210.00  
DC,P.DeWitt Cason,Columbia County Page 1 of 2 B:1203 P:840

## Warranty Deed

Made this October 12, 2010 A.D.

By **MAGDALENE STORMANT KIRBY**, f/k/a **Magdalene Stormant**, 9345 SE County Road 135, White Springs, Florida 32096, hereinafter called the grantor,

to **HERMAN R. STILES and ETHEL W. STILES, husband and wife**, whose post office address is: 410 SE Rosewood Circle, Lake City, Florida 32025, hereinafter called the grantee:

(Whenever used herein the term "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

**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, viz:

LOT 25 of SUWANNEE HIGHLANDS, a subdivision according to the Plat thereof as recorded in Plat Book 4 page 26 of the Public Records of COLUMBIA COUNTY, FLORIDA.

ALSO:

Begin at a point on the Southerly Right of Way line of State Road S - 246, said point being the NE corner of the abovescribed Lot 25, and run thence North 55° 16' 24" East along the Southerly Right of Way of said State road S - 246 a distance of 153.79 feet to the East line of Section 16, Township 2 South, Range 16 East, Thence run South 0° 28' 36" East along the East line of said Section 16, 253.81 feet to a concrete monument on the East line of said Lot 25, thence North 37° 42' 45" West 210.08 feet along the East line of said Lot 25, to the Southerly Right of Way of State Road S - 246 and the Point of Beginning, said land being triangular in shape and in and a part of the NE 1/4 of the SE 1/4 of said Section 16, Township 2 South, Range 16 East.

Said property is not the homestead of the Grantor(s) under the laws and constitution of the State of Florida in that neither Grantor(s) or any members of the household of Grantor(s) reside thereon.

Parcel ID Number: 01630-003 & 01631-025

**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 grantee 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 31, 2009

Prepared by  
Elaine R. Davis \*  
American Title Services of Lake City, Inc.  
321 SW Main Boulevard, Suite 105  
Lake City, Florida 32025

File Number: 10-273

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

*Signed, sealed and delivered in our presence:*

Elaine R. Davis  
Witness Printed Name Elaine R. Davis

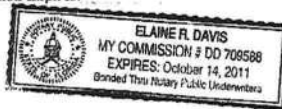
Magdalene Stormant Kirby (Seal)  
MAGDALENE STORMANT KIRBY, f/k/a Magdalene  
Stormant  
Address: 9345 SE County Road 135, White Springs, Florida  
32096

Johnny M. Hamm  
Witness Printed Name Johnny M. Hamm  
State of Florida  
County of COLUMBIA

\_\_\_\_\_  
Address: \_\_\_\_\_ (Seal)

The foregoing instrument was acknowledged before me this 12th day of October, 2010, by MAGDALENE STORMANT KIRBY, who is/are personally known to me or who has produced Drivers License as identification.

Elaine R. Davis  
Notary Public  
Print Name: \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_



# Columbia County Property Appraiser

DB Last Updated: 11/4/2010

**2010 Tax Year**

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

Parcel: 16-2S-16-01631-025

<< Next Lower Parcel

Next Higher Parcel >>

Search Result: 1 of 1

## Owner & Property Info

<b>Owner's Name</b>	KIRBY MAGDALENE STORMANT		
<b>Mailing Address</b>	C/O NEAL STORMANT 9345 SE COUNTY ROAD 135 WHITE SPRINGS, FL 32096		
<b>Site Address</b>	4978 NW LASSIE BLACK ST		
<b>Use Desc. (code)</b>	MISC RES (000700)		
<b>Tax District</b>	3 (County)	<b>Neighborhood</b>	16216
<b>Land Area</b>	1.150 ACRES	<b>Market Area</b>	03
<b>Description</b>	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 25 SUWANNEE HIGHLANDS S/D. JOINS RE 01630-003. ORB 764-2022, 767-901			



## Property & Assessment Values

2010 Certified Values		
<b>Mkt Land Value</b>	cnt: (0)	\$12,125.00
<b>Ag Land Value</b>	cnt: (2)	\$0.00
<b>Building Value</b>	cnt: (0)	\$0.00
<b>XFOB Value</b>	cnt: (5)	\$6,610.00
<b>Total Appraised Value</b>		\$18,735.00
<b>Just Value</b>		\$18,735.00
<b>Class Value</b>		\$0.00
<b>Assessed Value</b>		\$18,735.00
<b>Exempt Value</b>		\$0.00
<b>Total Taxable Value</b>	Cnty: \$18,735 Other: \$18,735   Schl: \$18,735	

## 2011 Working Values

**NOTE:**  
2011 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

## Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
11/2/1992	767/901	WD	I	U	35	\$21,000.00
9/11/1992	764/2022	CT	I	U	11	\$0.00
11/1/1984	553/276	WD	I	Q		\$7,000.00
1/1/1981	484/147	WD	V	Q		\$5,500.00

## Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

## Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0294	SHED WOOD/	0	\$100.00	0000001.000	0 x 0 x 0	(000.00)
0040	BARN,POLE	0	\$400.00	0000001.000	20 x 12 x 0	(000.00)
0040	BARN,POLE	0	\$200.00	0000001.000	10 x 12 x 0	(000.00)



## COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

Office: 386-758-1008 Fax: 386-758-2160

### **OWNER BUILDER DISCLOSURE STATEMENT**

I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed and bonded in Florida and to list his or her license numbers on permits and contracts.

I understand that I may build or improve a one-family or two-family residence or farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.

I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.

I understand that it is frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

I understand that I 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 my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 850-487-1395 or Internet website address <http://www.myflorida.com/dbpr/pro/cilb/index.html> for more information about licensed contractors.

I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address:

4978 NW Lassie Black St., White Springs, FL 32096

I agree to notify Columbia County Building Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure. Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

I understand that if I hire subcontractors they must be licensed for that type of work in Columbia County, ex: framing, stucco, masonry, and state registered builders. Registered Contractors must have a minimum of \$300,000.00 in General Liability insurance coverage and the proper workers' compensation. Specialty Contractors must have a minimum of \$100,000.00 in General Liability insurance coverage and the proper workers' compensation coverage.





November 11, 2010

Ethel Stiles

Reference: Repair recommendations  
Fire damaged mobile home  
NW Lassie Black Street

Dear Mrs. Stiles:

Freeman Design Group, Inc. has completed the structural investigation and engineering evaluation of the fire damaged structure at the referenced location. We were provided a sketch of the proposed floor layout and our work was planned in conjunction with and authorized by you.

#### Site Investigation

A visual walk-through was conducted and photos are included showing the current condition of the mobile home.

#### Findings

The current structure is a mobile home set up underneath a partially enclosed pole barn structure with a separate roof structure and a 14' x 36' site built addition. Only the mobile home portion was damaged by the fire. Most of the damage was confined to 4 or 5 trusses. The interior partitions have been completely removed along with most of the exterior siding, insulation, wiring, and plumbing.

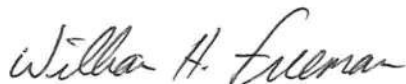
#### Recommendation

Based on our findings we recommend the following steps to be taken:

1. Install min. 7/16" o.s.b. sheathing on exterior walls fastened with 8d nails @ 6" o.c. along the edges and 12" o.c. in the field.
2. Insulate all exterior walls with min. R-13 batt or blown insulation.
3. Insulate the floor and ceiling with min. R-19 batt or blown insulation.

4. Install a 3'-0" x 5'-0" egress window in all the bedrooms.
5. Provide arc-fault breakers for all general circuits in the house except for circuits on a required ground fault circuit interrupt in the kitchen and bathroom areas.
6. Reconstruct all fire damaged trusses using the same template, wood sizes and species as the original. Use 1/2" cdx plywood gusset plates at each joint with a minimum 4-8d nails into each truss member and on both sides of each joint.
7. Provide smoke detectors, interconnected, in all bedrooms and directly outside of each bedroom.
8. Provide 2'-8" door to at least one restroom. If the restroom is located within the bedroom area, provide a 2'-8" door to the bedroom as well.
9. Freeman Design Group, Inc. should be involved during all construction activities to verify that procedures and results are as specified and as anticipated.

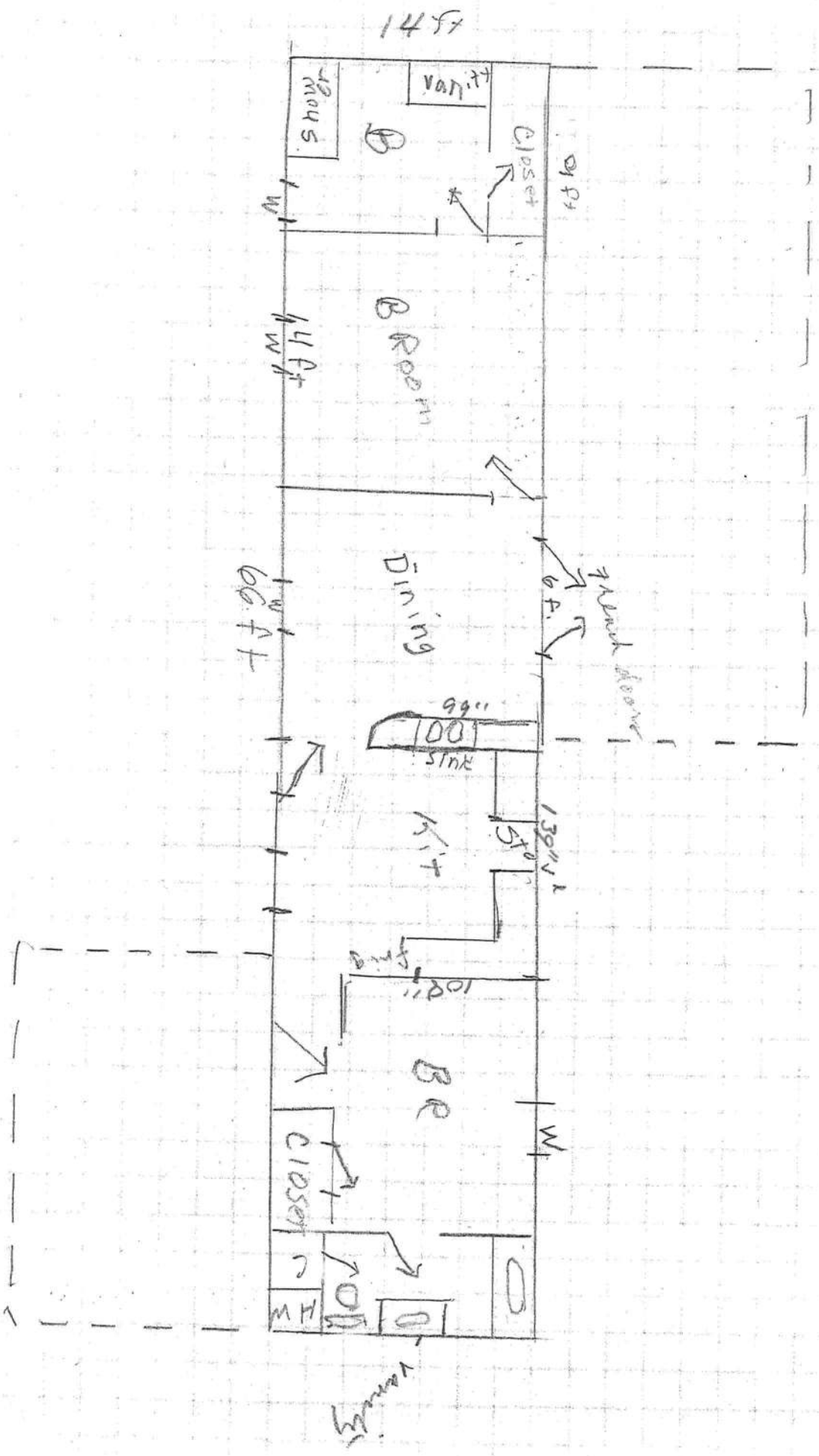
Sincerely,



William H. Freeman, P.E.  
Florida P.E. No. 56001

Bill Niles

752-7319



**SUBCONTRACTOR VERIFICATION FORM**

APPLICATION NUMBER \_\_\_\_\_ CONTRACTOR \_\_\_\_\_ PHONE \_\_\_\_\_

**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> X	Print Name <u>Ethel W. Stiles</u> License #: <u>Owner</u>	Signature <u>Ethel W. Stiles</u> Phone #:
<b>MECHANICAL/A/C</b>	Print Name _____ License #: _____	Signature _____ Phone #:
<b>PLUMBING/GAS</b>	Print Name <u>Barrs Plumbing</u> License #: <u>057219</u>	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	<u>Owner</u>	<u>Ethel W. Stiles</u>	<u>Ethel W. Stiles</u>
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.