

DATE 06/09/2010

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

PERMIT

000028640

APPLICANT	GEORGE PRESCOTT	PHONE	904 781-7381	
ADDRESS	8024 W. BEAVER ST.	JACKSONVILLE	FL 32220	
OWNER	ELIZABETH ANDERSON	PHONE	867-2335	
ADDRESS	1387 SE PUTNAM ST.	LAKE CITY	FL 32025	
CONTRACTOR	GEORGE PRESCOTT	PHONE	904 781-7381	
LOCATION OF PROPERTY	90 E, TR ELOISE AVE, TL PUTHAM, LEFT CORNER OF PUTHAM AND MARGARET			
TYPE DEVELOPMENT	MINOR REPAIRS/SFD	ESTIMATED COST OF CONSTRUCTION	5345.00	
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.	FLOOD ZONE	N/A	DEVELOPMENT PERMIT NO.	
PARCEL ID	33-3S-17-06428-000	SUBDIVISION	MORNINGSIDE HEIGHTS	
LOT	BLOCK	PHASE	UNIT	TOTAL ACRES
				<i>George R. Tabb</i>
Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor	
EXISTING	X10-199		GT	N
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident
COMMENTS: NOC ON FILE				

Check # or Cash 2628

**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	

BUILDING PERMIT FEE \$ 30.00 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 \$ 30.00

INSPECTORS OFFICE *George R. Tabb* CLERKS OFFICE *CR*

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**

For Office Use Only	Application #	1006-32	Date Received	6/9/10	By G	Permit #	28640
Zoning Official	Date	Flood Zone	Land Use	Zoning			
FEMA Map #	Elevation	MFE	River	Plans Examiner	Date		
Comments							
<input type="checkbox"/> NOC <input type="checkbox"/> EH <input type="checkbox"/> Deed or PA <input type="checkbox"/> Site Plan <input type="checkbox"/> State Road Info <input type="checkbox"/> Parent Parcel # _____ <input type="checkbox"/> Dev Permit # _____ <input type="checkbox"/> In Floodway <input type="checkbox"/> Letter of Auth. from Contractor <input type="checkbox"/> F W Comp. letter							
IMPACT FEES:	EMS	Fire	Corr	Road/Code			
School	= TOTAL						

Septic Permit No. X10-199      Fax 904.693.2702

Name Authorized Person Signing Permit George A. Prescott      Phone 904.781.7381

Address 8024 W. Beaver St. JAX FL 32220

Owners Name Elizabeth Anderson      Phone 386-867-2335

911 Address 1387 SE Putnam St. Lake City FL 32055

Contractors Name George Prescott Const. Inc.      Phone 904.781.7381

Address 8024 W. Beaver St. JAX FL 32220

Fee Simple Owner Name & Address NA

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

Architect/Engineer Name & Address NA

Mortgage Lenders Name & Address NA

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

Property ID Number 33-3S-17-06428-000      Estimated Cost of Construction 534500

Subdivision Name Morningside Heights      Lot 3 Block 9 Unit        Phase       

Driving Directions From US41+US90 East on US90 to SE Eloise Ave R 3 Blks to left on SE Putnam St Brown House @ Putnam + SE Margaret Dr. on left.      Number of Existing Dwellings on Property       

Construction of minor repairs House      Total Acreage        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        Side        Side        Rear       

Number of Stories        Heated Floor Area        Total Floor Area        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. 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 6-19-09

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 PERMITTEE:** 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.

(Owners Must Sign All Applications Before Permit Issuance.)

  
Owners Signature

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

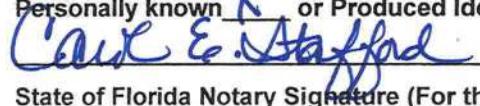
**CONTRACTORS AFFIDAVIT:** By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.

  
Contractor's Signature (Permittee)

Contractor's License Number CJC1509141  
Columbia County  
Competency Card Number \_\_\_\_\_

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 3 day of May 2010.

Personally known 1 or Produced Identification \_\_\_\_\_

  
State of Florida Notary Signature (For the Contractor)



CAROLE E. STAFFORD  
Notary Public, State of Florida  
My Comm. Expires Feb. 11, 2014  
Commission No. DD 960664

386 362 4078

**Bid Proposal for Client Name: Elizabeth Anderson**  
**Address: 1387 SE Putnam St.**  
**City, State and Zip Lake City, FL 32025**

Walk Thru Date:  
Monday, April 19, 2010

38C - Monday, April 1  
867-7335

Contractor Name: Core Rescued Construction Inc.  
Contractor Address: 8024 West Beacon St unit TAX FL 32270  
Contractor Ph # 904-701-7381

10ARCO 112

**NOTE:** TOTAL Job cost for ~~not exceed~~ \$5 000 Labor & Materials excluding Health & Safety

**Signature**

Date: 4/20/10

**GRAND TOTAL L & M**

~~5285 00~~

5345

**Columbia County Property****Appraiser**

DB Last Updated: 3/29/2010

*Revised*  
**2009 Tax Roll Year**[Tax Collector](#)[Tax Estimator](#)[Property Card](#)[Parcel List Generator](#)[Interactive GIS Map](#)[Print](#)**Parcel:** 33-3S-17-06428-000[<< Next Lower Parcel](#) [Next Higher Parcel >](#)**Owner & Property Info**

Search Result: 1 of 2

[Next >>](#)

<b>Owner's Name</b>	ANDERSON ELIZABETH		
<b>Mailing Address</b>	1387 SE PUTNAM ST LAKE CITY, FL 32025		
<b>Site Address</b>	1387 SE PUTNAM ST		
<b>Use Desc. (code)</b>	SINGLE FAM (000100)		
<b>Tax District</b>	2 (County)	<b>Neighborhood</b>	33317
<b>Land Area</b>	0.276 ACRES	<b>Market Area</b>	06
<b>Description</b>	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 3 BLOCK 9 MORNINGSIDE HEIGHTS S/D. ORB 370-52, DC 517-187, 707-338, FINAL JDGMT TO CLEAR TITLE ORB 812-81, 812-741, 984-1624, WD 1101-2474, DC 1101-2475 (CAROLE GRAZIANO)			

**Property & Assessment Values**

2009 Certified Values		
Mkt Land Value	cnt: (0)	\$7,236.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (1)	\$38,101.00
XFOB Value	cnt: (2)	\$500.00
Total Appraised Value		\$45,837.00
Just Value		\$45,837.00
Class Value		\$0.00
Assessed Value		\$45,837.00
Exempt Value	(code: HX)	\$25,000.00
Total Taxable Value	Cnty: \$20,837 Other: \$20,837   Schl: \$20,837	

**2010 Working Values**

**NOTE:**  
2010 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
11/10/2006	1101/2474	WD	I	Q		\$39,900.00
5/15/2003	984/1624	WD	I	Q		\$30,000.00
10/10/1995	812/741	WD	I	Q		\$23,000.00

**Building Characteristics**

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1940	SINGLE SID (04)	1064	1606	\$37,307.00
<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)
0120	CLFENCE 4	1995	\$200.00	0000001.000	0 x 0 x 0	(000.00)
0296	SHED METAL	1995	\$300.00	0000001.000	0 x 0 x 0	(000.00)

**Land Breakdown**

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000100	SFR (MKT)	12061 SF - (0000000.276AC)	1.00/1.00/1.00/1.00	\$0.50	\$6,030.00

Columbia County Property Appraiser

DB Last Updated: 3/29/2010

1 of 2

**Next >>****DISCLAIMER**

This information was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Inst:201012009260 Date 6/9/2010 Time:2:33 PM  
DC,P DeWitt Cason,Columbia County Page 1 of 1 B:1195 P:2524

## NOTICE OF COMMENCEMENT

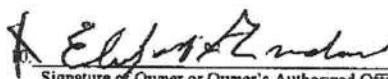
Tax Parcel Identification Number 33.35-17-06428.000

County Clerk's Office Stamp or Seal

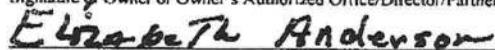
THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

1. Description of property (*legal description*): Lot 3 Blk 9 MORNING side Heights  
a) Street (job) Address: 1387 SE Putnam St. LAKE CITY FL 32055
2. General description of improvements: minor repaires
3. Owner Information  
a) Name and address: Elizabeth Anderson  
b) Name and address of fee simple titleholder (if other than owner) 1387 SE Putnam St. LAKE CITY FL 32055  
c) Interest in property: 100%
4. Contractor Information  
a) Name and address: Geo. Prescott Contracting Inc. 81204 1/2 Beaver St. Gorl Ft. 32220  
b) Telephone No. 904-781-3381 Fax No. (Opt.) 904-888-5167
5. Surety Information  
a) Name and address: NA  
b) Amount of Bond: \_\_\_\_\_  
c) Telephone No.: \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
6. Lender  
a) Name and address: NA  
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: NA  
b) Telephone No.: NA 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(l)(b), Florida Statutes:  
a) Name and address: NA  
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


Signature of Owner or Owner's Authorized Office/Director/Partner/Manager



Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 3 day of May, 20 10, by:

Elizabeth Anderson as Owner (type of authority, e.g. officer, trustee, attorney  
fact) for Carol E. Stafford (name of party on behalf of whom instrument was executed).

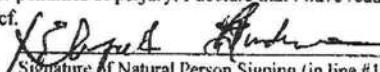
Personally Known Yes OR Produced Identification Type \_\_\_\_\_Notary Signature Carol E. Stafford

Notary Stamp of \_\_\_\_\_



CAROL E. STAFFORD  
Notary Public, State of Florida  
My Comm. Expires Feb. 11, 2014  
Commission No. DD 960664

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.)

# Occupancy

**CERTIFICATE OF 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 33-3S-17-06428-000

Use Classification MINOR REPAIRS/SFD

Fire: 0.00

Permit Holder GEORGE PRESCOTT

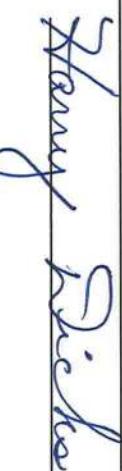
Waste: \_\_\_\_\_

Owner of Building ELIZABETH ANDERSON

Total: 0.00

Location: 1387 SE PUTNAM ST., LAKE CITY, FL

Date: 07/19/2010



Building Inspector



POST IN A CONSPICUOUS PLACE  
(Business Places Only)