	County Building Pe		PERMIT 000027704			
APPLICANT MARY ANN CRAWFORD	PI	HONE 752-5152	-			
ADDRESS 1482 SW COMMERCIAL GLE	EN LAKE CITY		FL 32025			
OWNER JOHN & JEAN MARIE ROCK	Pl	HONE	24			
ADDRESS 691 SW RIDGE ST	LAKE CITY		FL 32024			
CONTRACTOR STANLEY CRAWFORD	PI	HONE 752-5152				
LOCATION OF PROPERTY 47S, TR ON RII	OGE RD, 6TH HOUSE ON RIGHT	٢				
TYPE DEVELOPMENT REPLACE SUNROOM	ESTIMATED COST	F OF CONSTRUCTION	0.00			
HEATED FLOOR AREA 280.00	TOTAL AREA 280.00	HEIGHT	STORIES 1			
	•					
FOUNDATION WALLS ROOF PITCH FLOOR						
LAND USE & ZONING A-3 MAX. HEIGHT						
Minimum Set Back Requirments: STREET-FROM	VT 30.00 R	EAR 25.00	SIDE 25.00			
NO. EX.D.U. 0 FLOOD ZONE X	DEVELOPMEN	NT PERMIT NO.				
PARCEL ID 25-4S-16-03155-007	SUBDIVISION					
LOT BLOCK PHASE	UNIT	TOTAL ACRES				
RC	G0042896	Pan Qua Gas	1-9			
Culvert Permit No. Culvert Waiver Contract	ctor's License Number	Applicant/Owner	Contractor			
EXISTING X09-071	BK	RJ	<u>N</u>			
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident						
COMMENTS: NATURAL DISASTER/SINKHOLE, NO CHARGE, REPORT ON FILE, NOC ON FILE						
	,	Check # or C	ash			
FOR BUILD	ING & ZONING DEPART	MENT ONLY	(footer/Slab)			
Temporary Power F	oundation	Monolithic	(1000million)			
date/app. by	date/app. by	<del></del>	date/app. by			

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 PERMIT'S REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

Slab

Peri. beam (Lintel)

**CERTIFICATION FEE \$** 

date/app. by

date/app. by

date/app. by

date/app. by

date/app. by

date/app. by

M/H tie downs, blocking, electricity and plumbing

FIRE FEE \$ 0.00

**CLERKS OFFICE** 

date/app. by

Insulation

date/app. by

ZONING CERT. FEE \$

Sheathing/Nailing

Electrical rough-in

Culvert

SURCHARGE FEE \$

date/app. by

date/app. by

date/app. by

date/app. by

date/app. by

date/app. by

Under slab rough-in plumbing

date/app. by

Rough-in plumbing above slab and below wood floor

date/app. by

0.00

**BUILDING PERMIT FEE \$** 

FLOOD DEVELOPMENT FEE \$

INSPECTORS OFFICE

date/app. by

date/app. by

date/app. by

Utility Pole

0.00

Framing

Heat & Air Duct

Permanent power

Pump pole

Reconnection

MISC. FEES \$

"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.

# **Columbia County Building Permit Application**

For Office Use Only Application # 0903-23Date Received 3-13-09 By UH Permit # 27764
Zoning Official BLX Date 20.03.07 Flood Zone Land Use A-3 Zoning A-3
FEMA Map # N/A Elevation N/A MFE N/A River N/A Plans Examiner 124 Date 3/19/0
Comments damate by sinkhole - no charge - iteport included.
□ 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 EXEMPT - Remode
Septic Permit No. X09 - 1071 Fax 386 - 755 - 2165
Name Authorized Person Signing Permit Mary Ann Crawford Phone 386-752-5752
Address 1482 SW Commercial Gles, Lake City, FL 32025
Owners Name John & Jean Marie Rock Phone
911 Address 691 SW Ridge St, Lake City, FL 32024
Contractors Name Stenley Crawford Construction Phone 386-152-5752
Address 1482 SW Commercial Glow, Lake City, FC 32025
Fee Simple Owner Name & Address
Bonding Co. Name & Address N/A
Architect/Engineer Name & Address Mark Disosular
Mortgage Lenders Name & Address
Circle the correct power company – FL Power & Light – Clay Elec. – Suwannee Valley Elec. – Progress Energy
Property ID Number 25-45-16-03155-007 HX Estimated Cost of Construction 4/0, 000.00
Subdivision Name LOT 7 Oak Riche Estates Lot Block Unit 2 Phase
Driving Directions 47 South past I-75 turn R on Ridge Rd
6 th house on Right
Number of Existing Dwellings on Property_ NO
Construction of Replacement of Sun com an excisting hand Total Acreage Lot Size  Do you need a - Culvert Permit or Culvert Waiver of Have an Existing Drive Total Building Height 30
Do you need a - Culvert Permit or Culvert Waiver of Have an Existing Drive Total Building Height 30
Actual Distance of Structure from Property Lines - Front 65 Side 50 Side 158 Rear 617
Number of Stories Heated Floor Area
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.
Page 1 of 2 (Both Pages must be submitted together.) Revised 1-10-08

PAGE 02/13

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 COMMENCMENT 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 hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws and regulating construction and zoning. I further understand the above written/responsibilities in Columbia County for obtaining this Building Permit.

Owners Signature

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 (Permitee)

Contractor's License Number R60042896 **Columbia County** 

Competency Card Number

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 13 day of Minch

Personally known or Produced Identification

Page 2 of 2 (Both Pages must be submitted together.)

Notary Public State of Florida Lisa L Marinacci My Commission DD749087 Expires 06/20/2011

State of Florida Notary Signature (For the Contractor)

Revised 1-10-08

This instrument was Prepared By: STANLEY CRAWFORD CONSTRUCTION, INC. 1482 SW Commercial Glen Lake City, Florida 32025 Tax ID No: 25-4S-16-03155-007

#### NOTICE OF COMMENCEMENT

#### STATE OF FLORIDA COUNTY OF COLUMBIA

Inst:200912004144 Date:3/13/2009 Time:4:38 PM 2-DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1169 P:490

The undersigned hereby gives notice that improvement will be made to certain real Property, and in accordance with Chapter 713, Florida Statutes, the following information Is provided in this Notice of Commencement.

- 1. Description of property: Lot 7 Oak Ridge Estates S/D Unit 2
- 2. General description of improvement: Replacing a sunroom
- 3. Owner information:

Name and address: John Rock

691 SW Ridge St., Lake City, FL 32024

- 4. a Interest in property: Fee Simple
  - b. Name and address of fee simple title holder (if other than owner): None
- 5. Contractor: Stanley Crawford Construction, Inc.
  - a. Name and address: 1482 S.W. Commercial Glen, Lake City, FL 32025
  - b. Payee: State Farm Insurance/ John Rock Claim No. 59-D224-542
- 6. Persons within the State of Florida designated by Owner upon whom notices Or other documents may be served as provided by Section 713.13 (1) (a) 7., Florida Statutes: NONE

<ol><li>In addition to himself, Owner designates</li></ol>	n/a	
	to receive a copy of the Lienor's	
Notice as provided in section 713.13 (1) (b), Flor		

8. Expiration date of notice of commencement (the expiration date is 1 year from The date of recording unless a different date is specified).

John Rock

The foregoing instrument was acknowledged before me this 12 day of

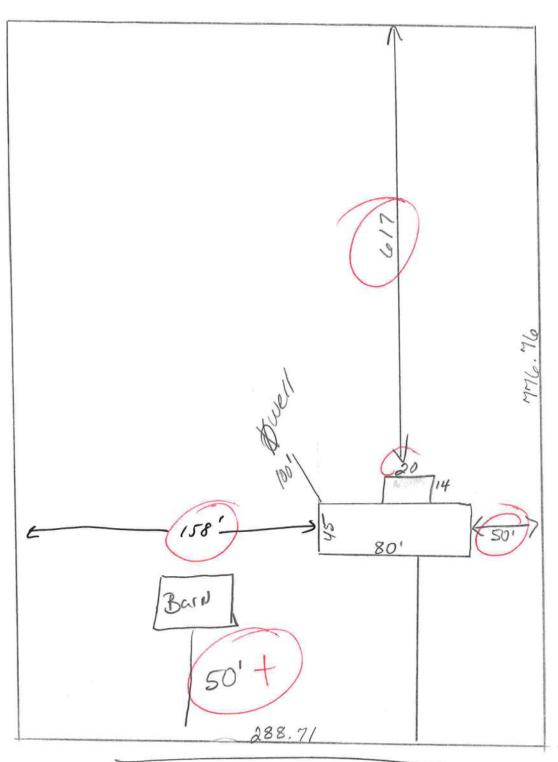
who are personally known to me and who did not take an oath.

Notary Public

My Commission Expires:

Notary Fubic State Commoda Lisa L Marinaco My Commission 06746687 Expires 08/20/2011

# John Rock Lot 7 Dale Ridge Est Unit 2



Ridge St

# Columbia County Property Appraiser

DB Last Updated: 3/5/2009

Parcel: 25-4S-16-03155-007 HX

# 2009 Preliminary Values

Search Result: 1 of 1

Tax Record Property Card Interactive GIS Map

#### **Owner & Property Info**

Owner's Name	ROCK JOHN	ROCK JOHN & JEAN MARIE			
Site Address	RIDGE				
Mailing Address	691 SW RIDGE ST LAKE CITY, FL 32024				
Use Desc. (code)	SINGLE FAM (000100)				
Neighborhood	25416.03	Tax District	2		
UD Codes	MKTA01	Market Area	01		
Total Land Area	0.000 ACRES				
Description	LOT 7 OAK RIDGE ESTATES S/D UNIT 2. ORB 754- 1595				

#### GIS Aerial



#### **Property & Assessment Values**

Mkt Land Value	cnt: (1)	\$64,800.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (1)	\$173,516.00
XFOB Value	cnt: (3)	\$25,973.00
Total Appraised Value		\$264,289.00

Just Value		\$264,289.00
Class Value	\$0	
Assessed Value		\$156,551.00
Exempt Value	(code: HX)	\$50,000.00
Total Taxable Value		\$106,551.00

#### Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
11/21/1991	754/1595	WD	I	Q		\$110,000.00

#### **Building Characteristics**

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1984	Common BRK (19)	3646	3846	\$173,516.00
	Note: All S.F. calculation	s are based	on exterior building d	imensions.		

#### **Extra Features & Out Buildings**

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0031	BARN,MT AE	0	\$7,200.00	2400.000	40 x 60 x 0	(.00)
0280	POOL R/CON	1984	\$7,373.00	512.000	16 x 32 x 0	(.00.)
0169	FENCE/WOOD	1993	\$11,400.00	1520.000	0 x 0 x 0	(.00.)

#### Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000100	SFR (MKT)	1.000 LT - (.000AC)	1.00/1.00/1.20/1.00	\$64,800.00	\$64,800.00

Columbia County Property Appraiser

DB Last Updated: 3/5/2009

1 of 1

### Jacksonville

## State Farm Insurance Companies 8001 Baymeadows Way Jacksonville, Fl. 32256 Fax (904) 443-4580 12/26/2008 10:55 AM

Estimate:

59-D224-542

Insured: ROCK, JOHN

Property:

691 SW RIDGE ST

LAKE CITY, FL 32024-3353

Home:

(386) 758-9032

Claim Number:

Policy Number:

59-D224-542 80-PU-3166-9

Type of Loss:

Other

Deductible:

\$1,000.00

Price List:

FLGA7F8D1

Restoration/Service/Remodel

F = Factored In, D = Do Not Apply

Date of Loss:

11/15/2008

Date Inspected:

11/17/2008

# Summary for Dwelling

		150 cm ( <del>50</del> )	
Line Item Total	200	*	11,403.84
Material Sales Tax	@	7.000% x 3,852,22	269.66
Subtotal			11,673.50
General Contractor Overhead	@	10.0% x (1).11,673.50	1,167.35
General Contractor Profit	@	10.0% 1 15 111 1,673.50	1,167.35
Replacement Cost Value (Includia	ng Ge	neral Contractor Overhead and Profit)	14,008.20
Less Deductible			(1,000.00)
Net Payment		**	\$13,008.20
€			- Company of the Comp

Tammy H. Fowler (904) 828-1689

ALL AMOUNTS PAYABLE ARE SUBJECT TO THE TERMS, CONDITIONS AND LIMITS OF YOUR POLICY.

	Notice of Treatmen	t No react
	est Control & Chemical Co	
Site Location: Subdivide Lot #Block Address	sionPermit #	7704
Product used  Premise	Active Ingredient Imidacloprid	% Concentration 0.1%
☐ <u>Termidor</u>	Fipronil	0.12%
Bora-Care D	Disodium Octaborate Tetrah	ydrate 23.0%
Type treatment:	Soil Wood	i
Area Treated	Square feet Linear fee	et Gallons Applied
	Code 104.2.6 – If soil chemed, final exterior treatment shal.	
If this notice is for the formula of	Time Print	Technician's Name
Applicator - White	Permit File - Canary	Permit Holder - Pink