

DATE 05/24/2005

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000023190

APPLICANT MELANIE RODER PHONE 752-2281

ADDRESS 387 SW KEP CT LAKE CITY FL 32024

OWNER RAY WILLEMS PHONE 623-2672

ADDRESS 470 SW ARROWHEAD RD LAKE CITY FL 32024

CONTRACTOR ISAAC BRATKOVICH PHONE 719-7143

LOCATION OF PROPERTY 47 S, R 242, R ARROWHEAD RD, ON TH LEFT BEFORE THE PEPSI PLANT, WHITE WTH BLUE TRIM

TYPE DEVELOPMENT ADDITION CABINET SHP ESTIMATED COST OF CONSTRUCTION 50000.00

HEATED FLOOR AREA TOTAL AREA 4800.00 HEIGHT 14.00 STORIES 1

FOUNDATION CONCRETE WALLS METAL ROOF PITCH 4/12 FLOOR SLAB

LAND USE & ZONING ILW MAX. HEIGHT 35

Minimum Set Back Requirments: STREET-FRONT 20.00 REAR 15.00 SIDE 15.00

NO. EX.D.U. 1 FLOOD ZONE XPP DEVELOPMENT PERMIT NO.

PARCEL ID 24-4S-16-03120-103 SUBDIVISION WINDSWEPT INDUSTRIAL PARK

LOT 3 BLOCK PHASE 1 UNIT TOTAL ACRES 1.69

CBC059323 Melanie Roder

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

EXISITNG 05-0465-E BK N

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

COMMENTS: NOC ON FILE

SDP 05-01 APPROVED

FLOOR 1 FOOT ABOVE THE ROAD/ADDING TO THE EXISTING BUILDING PER BK Check # or Cash 0413

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 Rough-in plumbing above slab and below wood floor

 date/app. by date/app. by date/app. by

Electrical rough-in Heat & Air Duct Peri. beam (Lintel)

 date/app. by date/app. by date/app. by

Permanent power C.O. Final Culvert

 date/app. by date/app. by date/app. by

M/H tie downs, blocking, electricity and plumbing Pool

 date/app. by date/app. by date/app. by

Reconnection Pump pole Utility Pole

 date/app. by date/app. by date/app. by

M/H Pole Travel Trailer Re-roof

 date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 250.00 CERTIFICATION FEE \$ 24.00 SURCHARGE FEE \$ 24.00

MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$

FLOOD ZONE DEVELOPMENT FEE \$ CULVERT FEE \$ TOTAL FEE 348.00

INSPECTORS OFFICE CLERKS OFFICE

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."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

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

New Construction Subterranean Termite Soil Treatment Record

OMB Approval No. 2502-0525
(exp. 10/31/2005)

This form is completed by the licensed Pest Control Company.

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information is mandatory and is required to obtain benefits. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

Section 24 CFR 200.926d(b)(3) requires that the sites for HUD insured structures must be free of termite hazards. This information collection requires the builder to certify that an authorized Pest Control company performed all required treatment for termites, and that the builder guarantees the treated area against infestation for one year. Builders, pest control companies, mortgage lenders, homebuyers, and HUD as a record of treatment for specific homes will use the information collected. The information is not considered confidential.

This report is submitted for informational purposes to the builder on proposed (new) construction cases when soil treatment for prevention of subterranean termite infestation is specified by the builder, architect, or required by the lender, architect, FHA, or VA.

All contracts for services are between the Pest Control Operator and builder, unless stated otherwise.

Section 1: General Information (Treating Company Information)

23190

Company Name: Aspen Pest Control, Inc.
Company Address: 301 NW Cole Terrace City Lake City State FL Zip 32055
Company Business License No. JB109476 Company Phone No. 386-755-3611
FHA/VA Case No. (if any) _____

Section 2: Builder Information

Company Name: Williams Ruston Wood Workers Company Phone No. _____

Section 3: Property Information

Location of Structure(s) Treated (Street Address or Legal Description, City, State and Zip) 470 S.W. Arrowhead Rd
Jake T. H. Fla.

Type of Construction (More than one box may be checked) ☒ Slab ☐ Basement ☐ Crawl ☐ Other _____
Approximate Depth of Footing: Outside 12 Inside 0 Type of Fill Dirt

Section 4: Treatment Information

Date(s) of Treatment(s) 5-25-05
Brand Name of Product(s) Used Sentinel
EPA Registration No. 70907-7-53843
Approximate Final Mix Solution % 0.5%
Approximate Size of Treatment Area: Sq. ft. 4000 Linear ft. 0 Linear ft. of Masonry Voids 0
Approximate Total Gallons of Solution Applied 400
Was treatment completed on exterior? ☐ Yes ☒ No
Service Agreement Available? ☐ Yes ☒ No

Note: Some state laws require service agreements to be issued. This form does not preempt state law.

Attachments (List) _____

Comments _____

Name of Applicator(s) Steve Brennan Certification No. (if required by State law) JF104376

The applicator has used a product in accordance with the product label and state requirements. All treatment materials and methods used comply with state and federal regulations.

Authorized Signature Steve Brennan Date 5-25-05

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Form **NPCA-99-B** may still be used

form **HUD-NPCA-99-B** (04/2003)

Reorder Product #2581 • From Crown Graphics, Inc. • 1-800-252-4011

Ray Willem's Addition

CK# 0413

Columbia County Building Permit Application

Revised 9-23-04

For Office Use Only Application # 0505-39 Date Received 5/9/05 By G Permit # 23190
Application Approved by - Zoning Official BLK Date 20.05.05 Plans Examiner OK JH Date 5-20-05
Flood Zone X pft Development Permit N/A Zoning ILW Land Use Plan Map Category IND.
Comments SDP 05-01

Applicants Name Melanie Roder Phone 752-2281
Address 387 SW Kemp Ct Lake City, FL 32024
Owners Name Ray Willem's - Willem's Custom Woodworks Phone 623-2672
911 Address 470 SW Arrowhead Rd Lake City, FL 32024
Contractors Name Isaac Construction Phone 719-7143
Address 1005 SW Water Ave Lake City, FL 32025
Fee Simple Owner Name & Address NA
Bonding Co. Name & Address NA
Architect/Engineer Name & Address Will Myers / Nick Geister
Mortgage Lenders Name & Address First Federal P.O. Box 2029, Lake City, FL 32024
Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Energy
Property ID Number 24-45-16-03120-103 Estimated Cost of Construction 50,000
Subdivision Name Windswept Industrial Lot 3 Block Unit Phase 1
Driving Directions 475 TR on 242 TR on Arrowhead rd. Jobsite is on L before Pepsi, white with blue trim.
Cabinet shop
Type of Construction C1 (Commercial Intensive) Number of Existing Dwellings on Property 1
Total Acreage 1.69 Lot Size Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
Actual Distance of Structure from Property Lines - Front 80' Side 134' Side 114' Rear 85.7'
Total Building Height 14' Number of Stories 1 Heated Floor Area 7200 Roof Pitch 4-12

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.

OWNERS AFFIDAVIT: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws and regulating construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA
COUNTY OF COLUMBIABarbara C. Webster
Commission # DD329279
Expires July 2, 2008
Bonded Trust Firm: Insurance, Inc. 889-385-7919

Contractor Signature

Contractors License Number CBC# 059.323Competency Card Number

NOTARY STAMP/SEAL

Sworn to (or affirmed) and subscribed before me

this 22nd day of April 2005Personally known X or Produced Identification

Notary Signature

05-0465-14

MAP OF BOUNDARY SURVEY

SHOWING LOT 3, OF WINDSWEEP INDUSTRIAL PARK SUBDIVISION, PHASE ONE SUBDIVISION, ACCORDING TO THE PLAT THEREOF RECORDED IN PLAT BOOK PAGES 84 & 85, OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA.

Site Plan
Billions
Pan Construction
TSCA

EH approval *

1.69 Acres

LOT 2
N 89°24'13" E 338.00' (S)
N89°11'54"E 337.91' (P)

5-425
MSL
237.45' (S)
237.45' (P)

237.45' (S)
237.45' (P)

S00°48'31"E 178.40' (P)
S 00°48'31" E 178.97' (S)
SW ARROWHEAD TERRACE (66' RW)

AS DONE UNDER MY DIRECT
EMMUDA TECHNICAL STANDARDS
TO CHAPTER 61017-8, FLORIDA
172, FLORIDA STATUTES.

DESCRIPTION FURNISHED THE PUBLIC RECORDS
DIRECTOR FOR EASEMENTS, TILE, COVANTS,
OR ON ORDINANCES, ETC., THERE COULD BE
EFFECT THIS PARCEL.

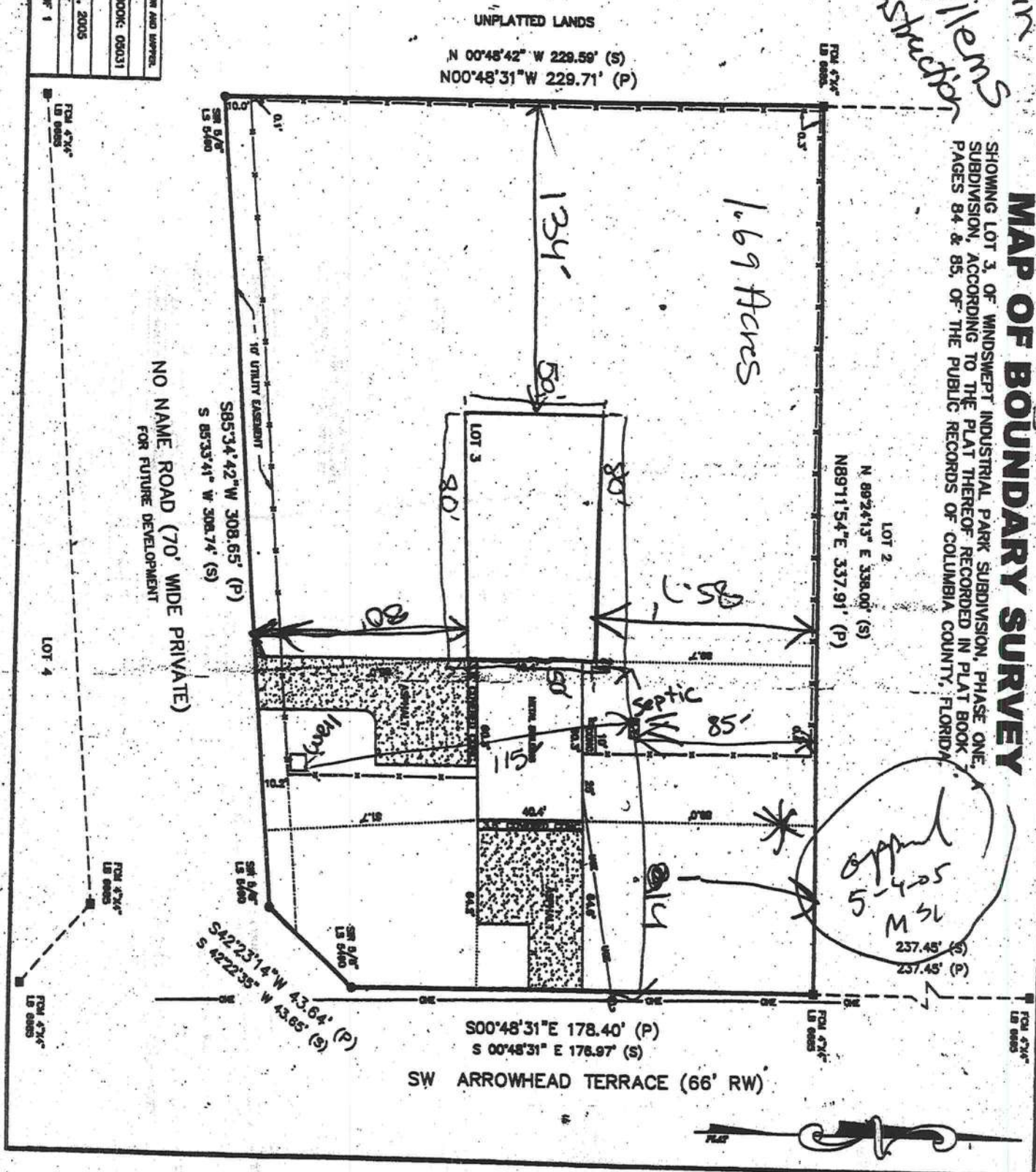
WORKS, LLC
BANK OF FLORIDA/
INCE FUND, INC

7/1
17/1
3-31-2005

THE OFFICIAL ISSUED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER.

D KAPPER E 53 8	DRAWN BY: WNK	FIELD BOOK: 08031
	SCALE: 1" = 40'	
	SURVEY DATE: FEBRUARY 1, 2005	
	JOB NUMBER	SHEET
WYKRESS, LLC	08031	1 OF 1

NO NAME ROAD (70' WIDE PRIVATE)
FOR FUTURE DEVELOPMENT



Doc. 1,715.00

THIS INSTRUMENT WAS PREPARED BY:

TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

RETURN TO:

TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

File No. 05-104

Property Appraiser's
Parcel Identification No.
24-48-16-03120-103

Inst:2005008719 Date:04/15/2005 Time:10:23

Doc Stamp-Deed : 1715.00

DC, P. Dewitt Cason, Columbia County B:1043 P:1273

WARRANTY DEED

THIS INDENTURE, made this 14th day of April 2005, BETWEEN CAROL J. SIMONSON, who does not reside on the property described herein, whose post office address is 22630 45th Drive, Lake City, Florida 32024, of the County of Columbia, State of Florida, grantor*, and WILLEMS CUSTOM WOODWORKS, LLC, a Florida Limited Liability Company, whose document number assigned by the Secretary of State of Florida is L03000044710 and whose Federal Tax I.D. Number is 43-2036441*, whose post office address is 137 SW Meadow Terrace, Lake City, Florida 32024, of the County of Columbia, State of Florida, grantee*.

WITNESSETH: that said grantor, for and in consideration of the sum of Ten Dollars (\$10.00), and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Columbia County, Florida, to-wit:

Lot 3 of WINDSWEEP INDUSTRIAL SUBDIVISION, PHASE ONE, a subdivision according to the plat thereof recorded in Plat Book 7, Pages 84 & 85 of the public records of Columbia County, Florida.

SUBJECT TO: Restrictions, easements and outstanding mineral rights of record, if any, and taxes for the current year.

N.B.: Neither the Grantor nor any member of her family live or reside on the property described herein or any land adjacent thereto or claim any part thereof or any land adjacent thereto as their homestead.


*N.B.: THE PURPOSE OF INCLUDING THE DOCUMENT NUMBER AND THE FEDERAL TAX I.D. NUMBER OF THIS GRANTEE IS TO AVOID CONFUSION BETWEEN THIS GRANTEE AND ANY OTHER LIMITED LIABILITY COMPANY OF THE SAME OR SIMILAR NAME.

and said grantor does hereby fully warrant the title to said land,
and will defend the same against the lawful claims of all persons
whomsoever.


*"Grantor" and "grantee" are used for singular or plural, as
context requires.

IN WITNESS WHEREOF, grantor has hereunto set grantor's hand
and seal the day and year first above written.

Signed, sealed and delivered
in our presence:


(First Witness)
Terry McDavid
Printed Name


 (SEAL)
Carol J. Simonson


(Second Witness)
Myrtle Ann McElroy
Printed Name

Inst:2005008719 Date:04/15/2005 Time:10:23
Doc Stamp-Deed : 1715.00
DC,P.Dewitt Cason,Columbia County B:1043 P:1274

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 14th
day of April 2005, by CAROL J. SIMONSON. She is personally known
to me and did not take an oath.


Notary Public
My Commission Expires:



This document prepared by:
Teresa Davis / First Federal
Savings Bank of Florida
P. O. Drawer Q
Live Oak, FL 32064

Inst: 2005008266 Date: 04/22/2005 Time: 09:04
mk DC, P. Dewitt Cason, Columbia County B: 1043 P: 2971

NOTICE OF COMMENCEMENT

STATE OF FLORIDA
COUNTY OF COLUMBIA

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

1. Description of Property: Lot 3 of Windswept Industrial Subdivision, Phase One, a subdivision according to the plat thereof recorded in Plat Bk 7, Pages 84 & 85 of the public records of Columbia County, Florida
2. General Description of Improvement: 50' X 80" warehouse
3. Owner Information:
 - a. Name and Address: Willems Custom Woodworks, LLC
137 SW Meadow Terrace, Lake City, Florida, 32024
 - b. Interest in Property: 100%
 - c. Name and Address of Fee Simple Titleholder (if other than Owner)
4. Contractor (name and address): Isaac Construction, Inc.
1005 SW Walter Ave, Lake City, FL 32024
5. Surety:
 - a. Name and Address:
 - b. Amount of Bond:
6. Lender (Name and Address): First Federal Savings Bank of Florida, Post Office Box 2029, Lake City, Florida, 32056, (386) 755-0600
7. Persons within the State of Florida designated by Owner upon notices or other documents may be served as provided by § 713.13(1)(a)(7), Florida Statutes:
8. In addition to himself, the Owner designates the following person to receive a copy of the Lienor's Notice as provided in § 713.13(1)(b), Florida Statutes (Name and Address): Teresa Davis of First Federal Savings Bank of Florida, 2571 US Hwy 90 W, Lake City, FL 32055
9. Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is specified):

Willems Custom Woodworks, LLC

By Raymond M. Willems
Raymond M. Willems,
Managing Member

Witness #1: Teresa J. Kaby

Raymond M. Willems

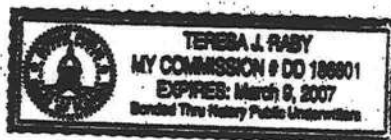
Sworn to and subscribed before me by the
Owner(s) on this 21 day of April, 2005.

Teresa J. Kaly
Type Name: Teresa J. Kaly
Notary Public, State of Florida

Personally known or Produced Identification: personally known

STATE OF FLORIDA, COUNTY OF COLUMBIA
I HEREBY CERTIFY that the above and foregoing
is a true copy of the original filed in this office.
P. DeWITT CASON, CLERK OF COURTS

By Marcus R. Kim
Deputy Clerk
Date April 22, 2005



Way
Williams
623-6943

COLUMBIA COUNTY BUILDING DEPARTMENT

**COMMERCIAL MINIMUM PLAN REQUIREMENTS AND CHECKLIST
FOR FLORIDA BUILDING CODE 2001 WITH AMENDMENTS**

ALL REQUIREMENTS LISTED ARE SUBJECT TO CHANGE
EFFECTIVE MARCH 1, 2002

ALL BUILDING PLANS MUST INCLUDE THE FOLLOWING ITEMS AND INDICATE COMPLIANCE WITH CHAPTER 1606 OF THE FLORIDA BUILDING CODE 2001 WITH AMENDMENTS BY PROVIDING CALCULATIONS AND DETAILS THAT HAVE THE SIGNATURE AND SEAL OF A CERTIFIED ARCHITECT OR ENGINEER REGISTERED IN THE STATE OF FLORIDA. THE FOLLOWING BASIC WIND SPEED AS PER SECTION 1606 SHALL BE USED.

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

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

APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL

GENERAL REQUIREMENTS: Two (2) complete sets of plans containing a floor plan, site plan, foundation plan, floor/roof framing plan or truss layout, wall sections and all exterior elevations with the following criteria and documents:

Applicant

Plans Examiner

- | | | |
|-------------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | All drawings must be clear, concise and drawn to scale ("Optional" details that are not used shall be marked void or crossed off). Square footage of different areas shall be shown on plans. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Designers name and signature on document (FBC 104.2.1) If licensed architect or engineer, official seal shall be affixed. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Two (2) Copies of Approved Site Plan</u> <i>See Note 1</i> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Minimum Type Construction</u> (FBC Table 500) |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <u>Wind Load Engineering Summary, calculations and any details required:</u>
a) Plans or specifications must state compliance with FBC Section 1606
b) The following information must be shown as per section 1606.1.7 FBC <ol style="list-style-type: none">1. Basic wind speed (MPH)2. Wind importance factor (I) and building category3. Wind exposure – if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated4. The applicable internal pressure coefficient5. Components and Cladding. The design wind pressure in terms of psf (kN/m²), to be used for the design of exterior component and cladding materials not specifically designed by the registered design professional |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Fire Resistant Construction Requirements shall include:</u>
a) Fire resistant separations (listed system)
b) Fire resistant protection for type of construction
c) Protection of openings and penetrations of rated walls (listed systems)
d) Fire blocking and draft-stopping
e) Calculated fire resistance |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | |

Fire Suppression Systems shall include: (To be reviewed by Fire Department)

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | a) Fire sprinklers |
| <input type="checkbox"/> | <input type="checkbox"/> | b) Fire alarm system (early warning) with name of licensed installer. If not shown on plans or not known at time of permitting, a separate permit shall be required by the licensed installer |
| <input type="checkbox"/> | <input type="checkbox"/> | c) Smoke evacuation system schematic |
| <input type="checkbox"/> | <input type="checkbox"/> | d) Stand-pipes |
| | | Pre-engineered system |
| | | Riser diagram |

Life Safety Systems shall include: (To be reviewed by Fire Department)

- | | | |
|--------------------------|--------------------------|---------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | a) Occupancy load and egress capacity |
| <input type="checkbox"/> | <input type="checkbox"/> | b) Early warning |
| <input type="checkbox"/> | <input type="checkbox"/> | c) Smoke control |
| <input type="checkbox"/> | <input type="checkbox"/> | d) Stair pressurization |
| <input type="checkbox"/> | <input type="checkbox"/> | e) Systems schematic |

Occupancy Load/Egress Requirements shall include:

- | | | | |
|-------------------------------------|-------------------------------------|--|------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | a) Occupancy load (gross and net) | <i>persons using warehouse (2)</i> |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | b) Means of egress
exit access, exit and exit discharge | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | c) Stair construction/geometry and protection | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | d) Doors | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | e) Emergency lighting and exit signs | |
| <input type="checkbox"/> | <input type="checkbox"/> | f) Specific occupancy requirements | |
| | | 1. Construction requirements | |
| | | 2. Horizontal exits/exit passageways | |

Structural Requirements shall include:

- | | | |
|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | a) Soil conditions/analysis |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | b) Show type of termite treatment (termicide or alternative method) |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | c) Design loads |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | d) Wind requirements |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | e) Building envelope |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | f) Structural calculations |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | g) Foundations <i>see NOTE 2</i> |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | h) Wall systems <i>see NOTE 3, 4</i> |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | i) Floor systems <i>see NOTE 5</i> |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | j) Roof systems |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | k) Threshold inspection plan (if applicable) |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | l) Stair systems |

Materials shall include:

- | | | |
|-------------------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | a) Wood |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | b) Steel |
| <input type="checkbox"/> | <input type="checkbox"/> | c) Aluminum |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | d) Concrete |
| <input type="checkbox"/> | <input type="checkbox"/> | e) Plastic |
| <input type="checkbox"/> | <input type="checkbox"/> | f) Glass (mfg. Listing for wind zone including details for installation and attachments) |
| <input type="checkbox"/> | <input type="checkbox"/> | g) Masonry |
| <input type="checkbox"/> | <input type="checkbox"/> | h) Gypsum board and plaster |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | i) Insulating (mechanical) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | j) Roofing (mfg. Listed system for wind zone with installation and attachments) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | k) Insulation |

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

is existing

Accessibility Requirements shall include:

- a) Site requirements
- b) Accessible route
- c) Vertical accessibility
- d) Toilet and bathing facilities
- e) Drinking fountains
- f) Equipment
- g) Special occupancy requirements
- h) Fair housing requirements

<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Interior Requirements shall include:

- a) Interior finishes (flame spread/smoke develop)
- b) Light and ventilation
- c) Sanitation

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Special Systems shall include:

- a) Elevators
- b) Escalators
- c) Lifts

Swimming Pools – Commercial – Plans shall be signed and sealed by a Professional Engineer registered in the State of Florida and approved by the Department of Business and Professional Regulation/Health Department Indicating compliance with the Florida Administrative Code, Chapter 64E-9 And Section 424 of the Florida Building Code

<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Electrical:

- a) Electrical wiring, services, feeders and branch circuits, over-current protection, grounding, wiring methods and materials, GFCIs
- b) Equipment
- c) Special Occupancies
- d) Emergency Systems
- e) Communication Systems
- f) Low Voltage
- g) Load calculations
- h) Riser diagram

200 amp Service

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Plumbing:

- a) Minimum plumbing facilities
- b) Fixture requirements
- c) Water supply piping
- d) Sanitary drainage
- e) Water heaters
- f) Vents
- g) Roof drainage
- h) Back flow prevention
- i) Irrigation
- j) Location of water supply
- k) Grease traps
- l) Environmental requirements
- m) Plumbing riser

no Plumbing or heating & ac in addition

NA Mechanical: no heating or ac in addition

fans

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | a) Energy calculation (signed and sealed by Architect or Engineer, registered in the State of Florida) |
| <input type="checkbox"/> | <input type="checkbox"/> | b) Exhaust systems (clothes dryer exhaust, kitchen equipment exhaust, Specialty equipment exhaust) |
| <input type="checkbox"/> | <input type="checkbox"/> | c) Equipment |
| <input type="checkbox"/> | <input type="checkbox"/> | d) Equipment location |
| <input type="checkbox"/> | <input type="checkbox"/> | e) Make-up air |
| <input type="checkbox"/> | <input type="checkbox"/> | f) Roof mounted equipment |
| <input type="checkbox"/> | <input type="checkbox"/> | g) Duct systems • no |
| <input type="checkbox"/> | <input type="checkbox"/> | h) Ventilation |
| <input type="checkbox"/> | <input type="checkbox"/> | i) Combustion air |
| <input type="checkbox"/> | <input type="checkbox"/> | j) Chimneys, fireplaces and vents |
| <input type="checkbox"/> | <input type="checkbox"/> | k) Appliances |
| <input type="checkbox"/> | <input type="checkbox"/> | l) Boilers |
| <input type="checkbox"/> | <input type="checkbox"/> | m) Refrigeration |
| <input type="checkbox"/> | <input type="checkbox"/> | n) Bathroom ventilation |
| <input type="checkbox"/> | <input type="checkbox"/> | o) Laboratory |

Gas:

- | | | |
|--------------------------|--------------------------|----------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | a) Gas piping |
| <input type="checkbox"/> | <input type="checkbox"/> | b) Venting |
| <input type="checkbox"/> | <input type="checkbox"/> | c) Combustion air |
| <input type="checkbox"/> | <input type="checkbox"/> | d) Chimney's and vents |
| <input type="checkbox"/> | <input type="checkbox"/> | e) Appliances |
| <input type="checkbox"/> | <input type="checkbox"/> | f) Type of gas |
| <input type="checkbox"/> | <input type="checkbox"/> | g) Fireplaces |
| <input type="checkbox"/> | <input type="checkbox"/> | h) LP tank locations |
| <input type="checkbox"/> | <input type="checkbox"/> | i) Riser diagram/shut offs |

Disclosure Statement for Owner Builders

*****Notice of Commencement Required Before Any Inspections will be Done**

Private Potable Water:

1 hp existing

- | | | |
|--------------------------|--------------------------|-----------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | a) Size of pump motor - |
| <input type="checkbox"/> | <input type="checkbox"/> | b) Size of pressure tank |
| <input type="checkbox"/> | <input type="checkbox"/> | c) Cycle stop valve if used |

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS:

1. **Building Permit Application:** A current Building Permit Application form is to be completed and submitted for all construction projects; If you were required to have a Site and Development Plan Approval, list SDP number.
2. **Parcel Number:** The parcel number (Tax ID number) from the Property Appraiser is required. A copy of property deed is also requested. (386) 758-1084
3. **Environmental Health Permit or Sewer Tap Approval:** A copy of the Environmental Health permit, existing septic tank approval or sewer tap is required
4. **City Approval:** If the project is located within the city limits of the Town of Fort White prior approval is required. The Town of Fort White approval letter is required to be submitted by the owner or contractor to this office when applying for a Building Permit. (386) 497-2321
5. **Flood Information:** All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting 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 8.8 of the Columbia County Land Development Regulations. Any project that is located within a flood zone where the base flood elevation (100 year flood) **has not been** established shall meet the requirements of section 8.7 of the Columbia County Land Development Regulations. **CERTIFIED FINISHED FLOOR ELEVATIONS WILL BE REQUIRED ON ANY PROJECT WHERE THE BASE FLOOD ELEVATION (100 YEAR FLOOD) HAS BEEN ESTABLISHED.**
A development permit will also be required. **The development permit cost is \$50.00**
6. **Driveway Connection:** If the property does not have an existing access to a public road, then an application for a culvert permit must be made (**\$25.00**). Culvert installation for commercial, industrial and other uses shall **conform to the approved site plan or to the specifications of a registered engineer. Joint use culverts will comply with Florida Department of Transportation specifications.** If the project is to be located on a F.D.O.T. maintained road, then an F.D.O.T. access permit is required.
7. **Suwannee River Water Management District Approval:** All commercial projects must have an SRWMD permit issued or an exemption letter, before a building will be issued.

ALL REQUIRED INFORMATION IS TO BE SUBMITTED FOR REVIEW. YOU WILL BE NOTIFIED WHEN YOUR APPLICATION AND PLANS ARE APPROVED AND READY TO PERMIT. PLEASE DO NOT EXPECT OR REQUEST THAT PERMIT APPLICATIONS BE REVIEWED OR APPROVED WHILE YOU ARE HERE – TIME WILL NOT ALLOW THIS – PLEASE DO NOT ASK

NOTICE:

ADDRESSES BY APPOINTMENT ONLY!

TO OBTAIN A 9-1-1 ADDRESS THE REQUESTER MUST CONTACT THE COLUMBIA COUNTY 9-1-1 ADDRESSING DEPARTMENT AT (386) 752-8787 FOR AN APPOINTMENT TIME AND DATE:

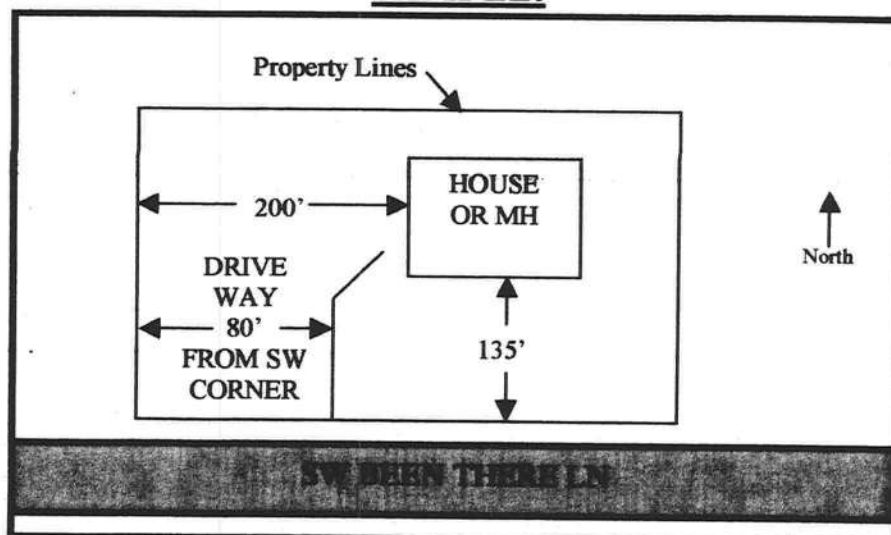
YOU CAN NOT OBTAIN A NEW ADDRESS OVER THE TELEPHONE. MUST MAKE AN APPOINTMENT!

THE ADDRESSING DEPARTMENT IS LOCATED AT 263 NW LAKE CITY AVENUE (OFF OF WEST U.S. HIGHWAY 90 WEST OF INTERSTATE 75 AT THE COLUMBIA COUNTY EMERGENCY OPERATIONS CENTER).

THE REQUESTER WILL NEED THE FOLLOWING:

1. THE PARCEL OR TAX ID NUMBER (SAMPLE: "25-4S-17-12345-123" OR "R12345-123) FOR THE PROPERTY.
2. A PLAT, PLAN, SITE PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
 - a. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
 - b. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
 - c. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



NOTE: 5 TO 7 WORKING DAYS MAY BE REQUIRED IF ADDRESSING DEPARTMENT NEEDS TO CONDUCT AN ON SITE SURVEY.

Columbia County Property Appraiser

DB Last Updated: 5/2/2005

2005 Proposed Values

Parcel: 24-4S-16-03120-103

Tax Record

Property Card

Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	WILLEMS CUSTOM WOODWORKS LLC
Site Address	WINDSWEPT INDUSTRIAL S/D
Mailing Address	137 SW MEADOW TERR LAKE CITY, FL 32024
Brief Legal	LOT 3 WINDSWEPT INDUSTRIAL S/D PHASE 1. ORB 976-1301, SWD 1032-1640, WD 1043-1273.

Use Desc. (code)	WAREHOUSE- (004800)
Neighborhood	24416.00
Tax District	2
UD Codes	MKTA06
Market Area	06
Total Land Area	1.690 ACRES

Property & Assessment Values

Mkt Land Value	cnt: (1)	\$52,000.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (1)	\$50,097.00
XFOB Value	cnt: (3)	\$12,505.00
Total Appraised Value		\$114,602.00

Just Value	\$114,602.00
Class Value	\$0.00
Assessed Value	\$114,602.00
Exempt Value	\$0.00
Total Taxable Value	\$114,602.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale Vlmp	Sale Qual	Sale RCode	Sale Price
4/14/2005	1043/1273	WD	I	Q		\$245,000.00
12/3/2004	1032/1640	WD	I	U	01	\$106,000.00
2/28/2003	976/1301	WD	V	Q		\$61,300.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	PREF M B A (008700)	2003	Mod Metal (25)	2400	2816	\$50,097.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0260	PAVEMENT-A	2003	\$5,797.00	5270.000	0 x 0 x 0	(.00)
0140	CLFENCE 6	2003	\$5,590.00	860.000	0 x 0 x 0	(.00)
0161	3-STRAND B	2003	\$1,118.00	860.000	0 x 0 x 0	(.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
004800	WAREHOUSE (MKT)	1.000 LT - (1.690AC)	1.00/1.00/1.00/1.00	\$52,000.00	\$52,000.00

Columbia County Property Appraiser

DB Last Updated: 5/2/2005

1 of 1

New Construction Subterranean Termite Soil Treatment Record

OMB Approval No. 2502-0525
(exp. 10/31/2005)

This form is completed by the licensed Pest Control Company.

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information is mandatory and is required to obtain benefits. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.
Section 24 CFR 200.926d(b)(3) requires that the sites for HUD insured structures must be free of termite hazards. This information collection requires the builder to certify that an authorized Pest Control company performed all required treatment for termites, and that the builder guarantees the treated area against infestation for one year. Builders, pest control companies, mortgage lenders, homebuyers, and HUD as a record of treatment for specific homes will use the information collected. The information is not considered confidential.

This report is submitted for informational purposes to the builder on proposed (new) construction cases when soil treatment for prevention of subterranean termite infestation is specified by the builder, architect, or required by the lender, architect, FHA, or VA.

All contracts for services are between the Pest Control Operator and builder, unless stated otherwise.

#23190

Section 1: General Information (Treating Company Information)

Company Name: Aspen Pest Control, Inc.
Company Address: 301 NW Cole Terrace City Lake City State FL Zip 32055
Company Business License No. JB109476 Company Phone No. 386-755-3611
FHA/VA Case No. (if any) _____

Section 2: Builder Information

Company Name: Williams Tuston Wood Works Company Phone No. _____

Section 3: Property Information

Location of Structure(s) Treated (Street Address or Legal Description, City, State and Zip) 470 S.W. Arrowhead Rd
Jacksonville, FL
Type of Construction (More than one box may be checked) ☒ Slab ☐ Basement ☐ Crawl ☐ Other _____
Approximate Depth of Footing: Outside 12 Inside 0 Type of Fill Dirt

Section 4: Treatment Information

Date(s) of Treatment(s) 5-25-05
Brand Name of Product(s) Used Surround
EPA Registration No. 70907-7-53443
Approximate Final Mix Solution % 0.5%
Approximate Size of Treatment Area: Sq. ft. 4000 Linear ft. 0 Linear ft. of Masonry Voids 0
Approximate Total Gallons of Solution Applied 400
Was treatment completed on exterior? ☐ Yes ☒ No
Service Agreement Available? ☐ Yes ☒ No

Note: Some state laws require service agreements to be issued. This form does not preempt state law.

Attachments (List) _____
Comments _____

Name of Applicator(s) Steve Brennan Certification No. (if required by State law) JF104376

The applicator has used a product in accordance with the product label and state requirements. All treatment materials and methods used comply with state and federal regulations.

Authorized Signature Steve Brennan Date 5-25-05

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)
Form **NPCA-99-B** may still be used form **HUD-NPCA-99-B** (04/2003)

23190



Cal-Tech Testing, Inc.

- Engineering
- Geotechnical
- Environmental

LABORATORIES

P.O. Box 1625 • Lake City, FL 32056-1625
6919 Distribution Avenue S., Unit #5 • Jacksonville, FL 32257

Tel. (386) 755-3633 • Fax (386) 752-5456
Tel. (904) 262-4046 • Fax (904) 262-4047

JOB NO.: 05-254
DATE TESTED: 05/25/05
DATE REPORTED: 05/25/05

REPORT OF IN-PLACE DENSITY TEST

PROJECT:	Building Addition, Arrowhead Terrace, Lake City, FL
CLIENT:	Willems Custom Woodworks, 470 SW Arrowhead Terrace, Lake City, FL 32024
GENERAL CONTRACTOR:	Willems Custom Woodworks
EARTHWORK CONTRACTOR:	Willems Custom Woodworks
INSPECTOR:	Terry Hygema
ASTM METHOD	SOIL USE
(D-2922) Nuclear	BUILDING FILL
SPECIFICATION REQUIREMENTS: 95%	

TEST NO.	TEST LOCATION	TEST DEPTH	WET DENSITY (lb/ft ³)	MOISTURE PERCENT	DRY DENSITY (lb/ft ³)	PROCTOR TEST NO.	PROCTOR VALUE	% MAXIMUM DENSITY
1	1' N x 30' W From SE Corner	6"	105.2	4.1	101.1	1 (PIT)	104.7	96.5%
2	18' E x 25' N From SW Corner	6"	113.5	6.9	106.2	1 (PIT)	104.7	101.4%

REMARKS: The Above Tests Meet Specification Requirements.

PROCTORS				
PROCTOR NO.	SOIL DESCRIPTION	MAXIMUM DRY UNIT WEIGHT (lb/ft ³)	OPT. MOIST.	TYPE
1 (PIT)	Dark Tan Sand (Timmerman's Pit)	104.7	8.5	MODIFIED (ASTM D-1557)

Respectfully Submitted,
CAL-TECH TESTING, INC.

Linda M. Creamer

Linda M. Creamer
President - CEO

sr

The test results presented in this report are specific only to the samples tested at the time of testing. The tests were performed in accordance with generally accepted methods and standards. Since material conditions can vary between test locations and change with time, sound judgement should be exercised with regard to the use and interpretation of the data.

Reviewed By:

John Denny

Date: 5/25/05
Florida Registration No: 52612

"Excellence in Engineering & Geoscience"

COLUMBIA COUNTY OFFICE 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 24-4S-16-03120-103

Building permit No. 000023190

Use Classification ADDITION CABINET SHP

Fire: 122.40

Permit Holder ISAAC BRATKOVICH

Waste:

Owner of Building RAY WILLEMS

Total: 122.40

Location: 470 SW ARROWHEAD RD, LAKE CITY, FL

PER MARSHA MOORE/TA

Date: 06/17/2005

Harry Bieker

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)



*Charged on Tax
bill per Tax
Collectors office.
7/1/07 JLB*



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23190

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GENERAL CONTRACTOR: Willems Custom Woodworks
EARTHWORK CONTRACTOR: Willems Custom Woodworks
INSPECTOR: Terry Hygema

ASTM METHOD

(D-2922) Nuclear

SOIL USE

BUILDING FILL

SPECIFICATION REQUIREMENTS: 95%

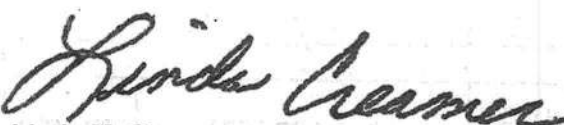
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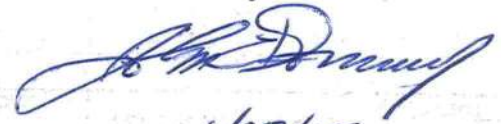
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PROCTOR NO.	SOIL DESCRIPTION	MAXIMUM DRY UNIT WEIGHT (lb/ft ³)	OPT. MOIST.	TYPE
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Linda M. Creamer
President - CEO

Reviewed By:



Date: 6/23/05
Florida Registration No: 52612

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