I his Permit Must be Prominently	Posted on Premises During Construction 000038180
APPLICANT C. JASON ELIXSON	PHON1 386,623,1741
ADDRESS 7490 W CR 18	LAKE BUILER 1-1 32054
OWNER JOSEPH BARBER, JR.	PHONE 786.205.1591
ADDRESS 447 SW SUMMERHILL GLEN	LAKE CHY H 32024
CONTRACTOR C. JASON ELIXSON	PHONE 386.623.1741
LOCATION OF PROPERTY 47 S. R KING, I. MAULD	IN. I. SUMMERHILL, 6TH ON LEFT
TYPE DEVELOPMENT ROOF OVERLAY/MH	FAULT COLOR TO THE
	ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTA	ALAREA HEIGH STORES
FOUNDATION WALLS	ROOF PITCH 3'12 FLOOR
LAND USE & ZONING	MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT	REAR SIDE
NO. EX.D.U. 1 FLOOD ZONE	DEVELOPMENT PERMIT NO.
PARCEL ID 03-58-16-03455-012 SUBD	DIVISION
37.77	
LOT BLOCK PHASE U	NIT TOTAL ACRES 5.03
CCC1325776	7
Culvert Permit No. Culvert Waiver Contractor's Lice	nse Number Applicant Owner Contractor JLW
Driveway Connection Septic Tank Number 1.U & Zonin	ng checked by Approved for Issuance New Resident Time STUP No.
COMMENTS: NOC ON FILE.	2
	Check # or Cash 7037
FOR DIM PING A	Check to Chair
97 15	ZONING DEPARTMENT ONLY (footer Slab)
date app. by	tio (C) 1
Under slab rough-in plumbing	Slab Sheathing Nailing
date/ann_by	date and by
Framing Insulation	date/app, by
Rough-in plumbing above slab and below wood floor	Lectrical rough-in
H. 15-	date/app, by date app by
Heat & Air Duct Peri, bear date app, by	m (Lintel) Pool
Permanent power C.O. Final	date/app, by date/app, by
date/app, by	date/app, by date/app, by
Tump pole	
Pump pole Utility Pole M date/app, by	/H tie downs, blocking, electricity and plumbing
date/app. by date/app. by Reconnection RV	date app, by Re-roof
date/app. by date/app. by	date app, by
date/app. by date/app. by Connection RV Connection RV Connection Conne	date app, by Re-roof date/app, by date/app, by
Reconnection RV date/app. by date/app. by RV date/app. by BUILDING PERMIT FEE \$ 0.00 CLRTIFICATI	date app, by Re-roof date/app, by date/app, by
Reconnection RV date/app. by RV date/app. by BUILDING PERMIT FEE \$ 0.00 CERTIFICATE MISC. FEES \$ 75.00 ZONING CERT. FEE \$	
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Reconnection RV date/app. by date/app. by BUILDING PERMIT FEE \$ 0.00 CERTIFICATE MISC. FEES \$ 75.00 ZONING CERT. FEE \$ PLAN REVIEW FEE \$ DP & FLOOD ZONE FEE \$ INSPECTORS OFFICE NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS F THIS PROPERTY THAT MAY BE FOUND IN THE D	Re-roof date app, by Re-roof date app, by date app, by
Reconnection RV date/app. by BUILDING PERMIT FEE \$ 0.00 CERTIFICATE MISC. FEES \$ 75.00 ZONING CERT. FEE \$ PLAN REVIEW FEE \$ DP & FLOOD ZONE FEE \$ INSPECTORS OFFICE NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS FACE THIS PROPERTY THAT MAY BE FOUND IN THE P NOTICE: ALL OTHER APPLICABLE STATE OR FEDERAL PERI PERMITTED DEVELOPMENT.	Re-roof date app. by Re-roof date app. by
Reconnection RV date/app. by BUILDING PERMIT FEE \$ 0.00 CERTIFICATE MISC. FEES \$ 75.00 /ONING CERT. FEE \$ PLAN REVIEW FEE \$ DP & FLOOD ZONE FEE \$ INSPECTORS OFFICE NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS F THIS PROPERTY THAT MAY BE FOUND IN THE P NOTICE: ALL OTHER APPLICABLE STATE OR FEDERAL PER PERMITTED DEVELOPMENT. WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF THE SECOND ASSOCIATION OF THE SECOND O	Re-roof date app. by Re-roof date app. by

Columbia County Building Permit

DATE 05/30/2019

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 Re-Roof's. Roof Repairs. Roof Over's

For Office Use Only Application # 1905 - 98 Date Received 5/30	By
Plans Examiner Date NOC Deed or PA Dontrac	tor Letter of Auth. F W Comp. letter
Product Approval Form Sub VF Form Owner POA Corporation I	Doc's and/or Letter of Auth.
Comments	
-	FAX
Applicant (Who will sign/pickup the permit) Jason Elixan	Phone <u>386-623-/74/</u>
Address 7490 West CR18 Lake Butler, F1.32054	
Owners Name Joseph Berber	Phone 786-205-1591
911 Address 447 Sw Symmerhill Glan Lake City, Fl. 32024	
Contractors Name Jasa Elizan	Phone 386-623-1741
Address 7490 West CK 18 Lake Bitter, F1.32054	A STATE OF THE STA
Contractors Email 1950nelixson @ contractor net	***Include to get updates for this job.
Fee Simple Owner Name & Address N/A	
Bonding Co. Name & Address	
Architect/Engineer Name & Address W/4	
Mortgage Lenders Name & Address W/+	
Property ID Number <u>03-55-16-03455-01</u>	
Subdivision NameLo	Block Unit Phase
Driving Directions Sisters Walcone Rd to SW Dyal Ave, Continue of	on Dyle Ave to Su king St.
light on king St. to Mauldin Are. Left on Mouldin to	<u> </u>
Summer hill, house is on the Left	
Construction of (circle) Re-Roof - Roof repairs - Roof Overlay or Other	
Cost of Construction 6200.00 Comme	ercial ORResidential
Type of Structure (House; Mobile Home; Garage; Exxon) Mobile Home	
Roof Area (For this Job) SQ FT 1990 Roof Pitch 3 /12, _	/12 Number of Stories
Is the existing roof being removed $\stackrel{\circ}{=}$ If NO Explain 1×45 over or	ne layer of shingles
Type of New Roofing Product (Metal; Shingles; Asphalt Flat) Metal	
Application is hereby made to obtain a permit to do work and installations as installation has commenced prior to the issuance of a permit and that all wor all laws regulating construction in this jurisdiction. CODE: 2014 Florida Buil	k be performed to meet the standards of

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 CONTRACTOR AND AGENT: 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 PPLICABLE 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. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

**Property owners must sign here before any permit will be issued.

Print Owners Name

**If this is an Owner Builder Permit Application then, ONLY the owner can sign the building permit when it is issued.

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.

panding Lemmi inciduting all application and belimit t	ime limitations.
Contractor's Signature	Contractor's License Number CCC 1325779 Columbia County Competency Card Number 445
Affirmed under penalty of perjury to by the Contractor and	d subscribed before me this 30 Hday of MAV 20 19
Personal knownroduced Identification	
State of Florida Notary Signature (For the Contractor)	SEAL:
State of Florida Notary Signature (For the Contractor)	

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

Columbia County Property Appraiser Jeff Hampton

2018 Tax Roll Year

updated: 5/9/2019

Retrieve Tax Record

2018 TRIM (pdf)

Property Card

Parcel List Generator

Show on GIS Map

Print

Show Viewer

Parcel: << 03-5S-16-03455-012 >>



Owner & I	Property Info	Result: 1	of 1
Owner	BARBER JOSEF ALISON STRACI 447 SW SUMME LAKE CITY, FL 3	HAN RHILL GLEN	
Site	445 SUMMERHILL GLN, LAKE CITY		
Description*	COMM NE COR OF 683.44 FT FOR POI 670.80 FT, E 356.72 335.46 FT TO POB. 512, 770-662, 770-6 789-1632, QC 826- 1363more>>>	3, CONT W 296.73 2 FT, N 335.46FT, N EX RD R/W. 349- 663, 785-2336, 789	2 FT, S W 60 FT, N -40, 456- 9-1282,
Area	5.03 AC	S/T/R	03-5S-16
Use Code**	MOBILE HOM (000200)	Tax District	3

^{*}The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

^{**}The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property	& Assessme	ent Values	S	
2018 Cer	tified Values	2019 Wo	rking Values	
Mkt Land (4)	\$33,869	Mkt Land (4)	\$35,619	
Ag Land (0)	\$0	Ag Land (0)	\$0	
Building (2)	\$53,435	Building (2)	\$55,226	
XFOB (5)	\$15,728	XFOB (5)	\$15,728	
Just	\$103,032	Just	\$106,573	
Class	\$0	Class	\$0	
Appraised	\$103,032	Appraised	\$106,573	
SOH Cap [?]	\$6,399	SOH Cap [?]	\$0	
Assessed	\$96,633	Assessed	\$106,573	
Exempt	HX H3 OTHER \$50,500	Exempt	\$0	
Total Taxable	county:\$46,133 city:\$46,133 other:\$46,133 school:\$71,133	Total Taxable	county:\$106,573 city:\$106,573 other:\$106,573 school:\$106,573	



Show Similar Sales within 1/2 mile Fill out Sales Questionnaire

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. Statewide approved products are listed online @ www.floridabuilding.org

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
1. EXTERIOR DOORS			
A. SWINGING			
B. SLIDING			
C. SECTIONAL/ROLL UP			
D. OTHER			
2. WINDOWS			
A. SINGLE/DOUBLE HUNG			
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. FIXED			
E. MULLION			
F. SKYLIGHTS			
G. OTHER			
3. PANEL WALL			
A. SIDING			
B. SOFFITS			
C. STOREFRONTS			
D. GLASS BLOCK			1
E. OTHER			
4. ROOFING PRODUCTS			
A. ASPHALT SHINGLES			
B. NON-STRUCTURAL METAL	Milley Tum Motals Inc	269- Rib - Parel	FL5211.2 77
C. ROOFING TILES			
D. SINGLE PLY ROOF			
E. OTHER			
5. STRUCTURAL COMPONENTS			
A. WOOD CONNECTORS			
B. WOOD ANCHORS			
C. TRUSS PLATES			
D. INSULATION FORMS			
E. LINTELS			
F. OTHERS	1		
			
6. NEW EXTERIOR			
ENVELOPE PRODUCTS			

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

Further, Lunderstand(these products may have to be removed if approval cannot be demonstrated during inspection.

X	5-30-19	
Contractor OR Agent Signature	Date	NOTES:

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

03-55-16-03455-012

Clerk's Office Stamp

My Comm. Expires May 24, 2020

Inst: 201912012266 Date: 05/30/2019 Time: 2:46PM

Page 1 of 1 B: 1385 P: 1412, P.DeWitt Cason, Clerk of Court

Columbia, County, By: BD

Deputy Clerk

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): Tr ID# 03-55-16-03455-012 a) Street (job) Address: 447 Sw Summerhill Glen Lyte City Ft. 32014
a) Street (Job) Address: 447 Sw Summer hill Glen Lyte City F1 32024
2. General description of improvements: New Metal Knof over
3. Owner Information or Lessee information if the Lessee contracted for the improvements:
a) Name and address: Joseph Barber IR 447 Sur Summarbill Corn Late City E1 37 CTV
b) Name and address of fee simple titleholder (if other than owner)
c) Interest in property Our reci
4. Contractor Information
a) Name and address: Jason Flixson Construction LC 7490 41. Cx 18 Like Butter 11.32054
b) Telephone No.: <u>386 6.33~1741</u>
5. Surety information (if applicable, a copy of the payment bond is attached):
a) Name and address: N/4
b) Amount of Band: W/A
c) Telephone No.: \mathcal{N}/\mathcal{A}
6. Lender
a) Name and address: \sqrt{A}
o) Phone No. 17/7—
7. Person 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:
a) Name and address:
b) Telephone No.:
O lo addition to bisself and the second and the sec
8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(b), Florida Statutes:
a) Name:OF
b) Telephone No.:
9. Expiration date of Notice of Commencement (the expiration date will be 1 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 RECOR
COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.
STATE OF FLORIDA
COUNTY OF COLUMBIA 10.
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Dead WA do AR
Printed Name and Signatory's Title/Office
miled Name and Signatory's Title/Omce
The foregoing instrument was acknowledged before me, a Florida Notary, this 28 day of May 2019, by: October Der Der Trans Owner for Property Joseph Barber Transcript (Name of Person) (Type of Authority) (Type of Authority)
ov:
cosph Darber Ir as owner for (Promoter) Tread 2 hall
(Name of Person) (Type of Authority) (name of party on hebalf of whom instrument was executed)
Personally Known OR Produced Identification Type FL Driver Lice, Sc
Notary Signature Notary Stamp or Seal:
VIOLET HOLGATE Notary Public - State of Florid Commission # FF 970423