

DATE 04/14/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000021742

APPLICANT RAY LUSSIER/ADVANTAGE POOLS PHONE 758.7522

ADDRESS 757 SW SR 247 LAKE CITY FL 32055

OWNER JULIA DEJESUS PHONE 754-3886

ADDRESS 407 NW INDIAN POND COURT LAKE CITY FL 32025

CONTRACTOR RAY LUSSIER/ADVANTAGE POOLS PHONE 758.7522

LOCATION OF PROPERTY LAKE JEFFERY ROAD TO OAKHAVEN S/D STAY RIGHT ON INDIAN POND
CRT, ST HOME ON LEFT.

TYPE DEVELOPMENT SWIMMIG POOL ESTIMATED COST OF CONSTRUCTION 20000.00

HEATED FLOOR AREA TOTAL AREA HEIGHT .00 STORIES

FOUNDATION WALLS ROOF PITCH FLOOR

LAND USE & ZONING A-3 MAX. HEIGHT 35

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 1 FLOOD ZONE N/A DEVELOPMENT PERMIT NO.

PARCEL ID 12-3S-15-00167-208 SUBDIVISION OAKHAVN

LOT 1 BLOCK B PHASE UNIT 2 TOTAL ACRES

CPC1456754

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

EXISTING X-04-0062 BLK RTJ N

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

COMMENTS:

NOC ON FILE

Check # or Cash 2248

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

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

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 \$ 100.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00

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

FLOOD ZONE DEVELOPMENT FEE \$ CULVERT FEE \$ TOTAL FEE 150.00

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 INCONVINCE, 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.

**Columbia County
Building Permit Application**

Date 3-26-04

Application No. 0403-83

Applicants Name & Address Raymond Lussier Phone 758-7523
757 SW SR 247 LAKE CITY FL 32055

Owners Name & Address JULIA DeJESUS Phone 754-3886
407 NW INDIAN POND CT.

Fee Simple Owners Name & Address _____ Phone _____

Contractors Name & Address Advantage Pools Phone 758-7523
757 SW SR 247 LAKE CITY FL 32055

Legal Description of Property LOT 1 BLOCK B UNIT 2 OAK HAVEN

Location of Property LAKE EFFERY TO LEFT IN OAK HAVEN STAY RIGHT ON INDIAN POND CT
LAST HOUSE ON LEFT

Tax Parcel Identification No. 12-35-15-00167-208 Estimated Cost of Construction \$ 30,000

Type of Development Swimming Pool Number of Existing Dwellings on Property _____

Comprehensive Plan Map Category A-3 Zoning Map Category A-3

Building Height _____ Number of Stories _____ Floor Area _____ Total Acreage in Development _____

Distance From Property Lines (Set Backs) Front 157 ✓ Side 54 ✓ Rear 450+ ✓ Street 157

Flood Zone N/A Certification Date _____ Development Permit N/A

Bonding Company Name & Address _____

Architect/Engineer Name & Address MICHAEL ROBINSON 921 SHADOWS DR LAKE LAND FL

Mortgage Lenders Name & Address _____

Application is hereby made to obtain a permit to do the 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 will 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 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.

Ray Lussier
Owner or Agent (including contractor)

Ray Lussier
Contractor
CPC 1456734
Contractor License Number

STATE OF FLORIDA
COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me
this 26th day of March 04 by _____

STATE OF FLORIDA
COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me
this 26th day of March 04 by _____

Personally Known X OR Produced Identification

Personally Known X OR Produced Identification

Carman James
COMMISSION # DD223375 EXPIRES
June 16, 2007
ISSUED THRU TROY FAIN INSURANCE, INC.

421742

Return to: (enclose self-addressed stamped envelope)

Name: Advantage Pools

Address: Rt. 18 Box 18800, Lake City, FL 32025

This Instrument Prepared by:

Name: Advantage Pools

Address: Rt. 18 Box 18800, Lake City, FL 32025

Property Appraiser's Parcel Identification

Inst:2004006755 Date:03/26/2004 Time:10:14

MCK DC, P. DeWitt Cason, Columbia County B:1010 P:2120

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

NOTICE OF COMMENCEMENT

Permit No. _____

Tax Folio No. _____

State of Florida _____

County of Columbia }

The undersigned hereby gives notice that improvements will be made to certain real property, and in accordance with chapter 713 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

Legal description of property (include Street Address, if available) Lot 1 Block B Unit 2 Oak Haven
12-35-15-00167-208General description of improvements Swimming PoolsOwner's Name: JULIA DE JESUSAddress 407 NW INDIAN POND CT LAKE CITY FL 32055Owner's interest in site of the improvement SWIMMING POOL

Fee Simple Title holder (if other than owner) _____

Address _____ Phone: _____ Fax: _____

Contractor Advantage PoolsAddress Rt. 18 Box 18800, Lake City, FL 32025Phone: 386-758-7522Fax: 386-758-6932

Surety _____ Phone: _____ Fax: _____

Address _____ Amount of bond \$ _____

Lender's Name _____

Address: _____ Phone: _____ Fax: _____

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.

Name _____

Address _____ Phone: _____ Fax: _____

In addition to himself, owner designates Ray LussierOf Advantage Pools Phone: 758-7522 Fax: 758-6932

to receive a copy of the Lender's Notice as provided in Section 713.13(1)(b), Florida Statutes.

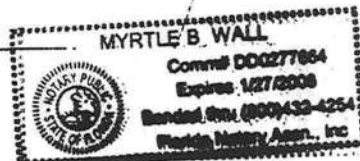
Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is specified)

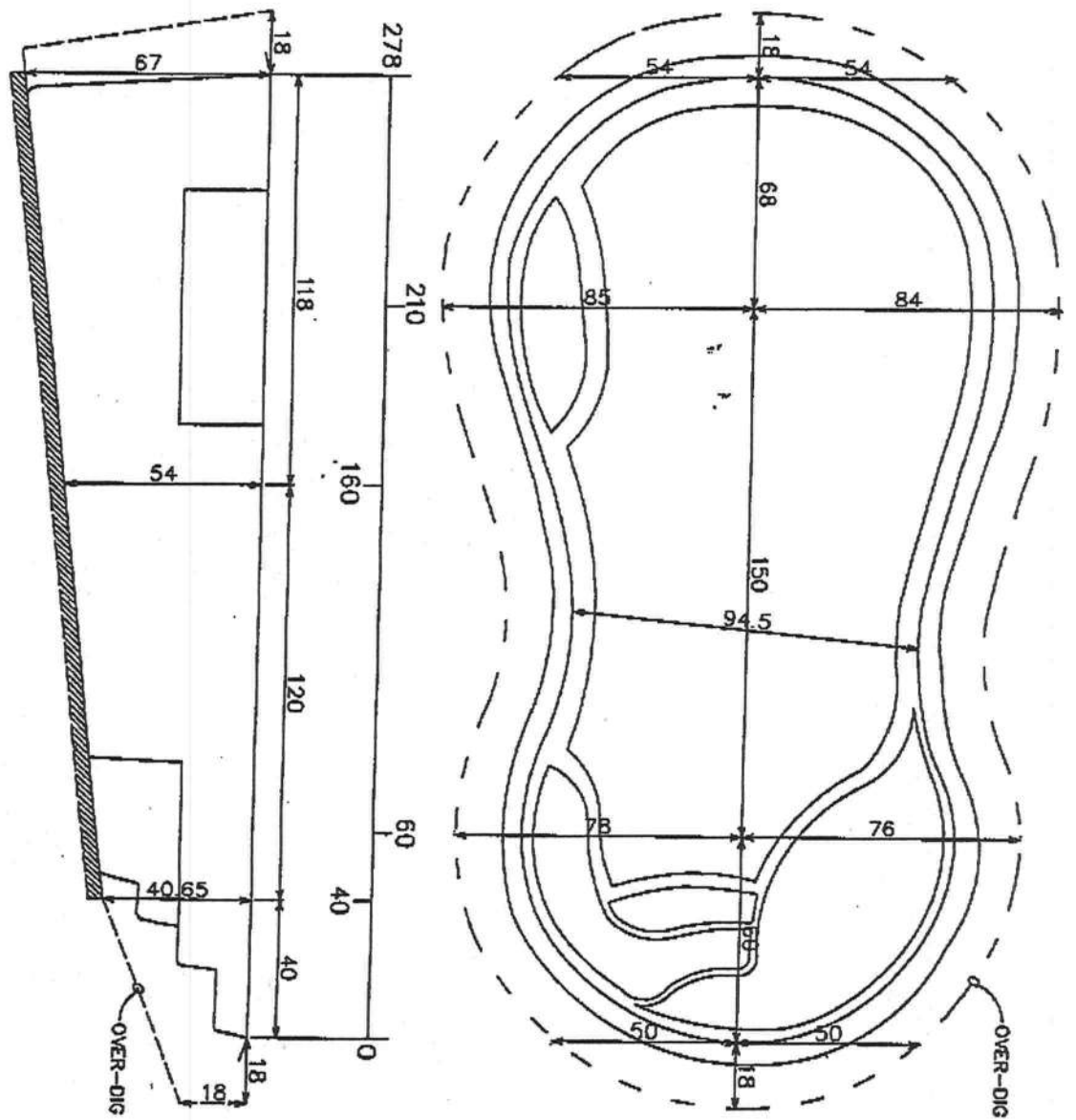
[Signature] JULIA DE JESUS
Signature of Owner Printed Name of Owner

NOTARY RUBBER STAMP SEAL

I have relied upon the following identification of the Affiant KnownTo meSworn to and subscribed before me this Feb. 26 day of 2004Notary Signature Myrtle B. WallPrinted Name Myrtle B. Wall

Notice of Commencement.max





SUNDIAL - 180

SAN JUAN POOLS DIG PLA

SCALE: 1/4"=1'-0"

ALL MEASUREMENTS IN INCHES

SUNDIALC

21742

Residential Swimming Pool Spa and Hot Tub Safety Act Requirement

I, JULIA DE JESUS hereby affirm that one of the following methods will be used to meet the requirements of Chapter 515, Florida Statutes.

- ** The pool will be isolated from access to the home by an enclosure that meets the pool barrier requirements of Florida Statute 515.29;
- ☒ ** The pool will be equipped with an approved safety pool cover that complies with ASTM F1346-91 (Standard Performance Specifications for Safety Covers for Swimming Pools, Spas and Hot Tubs);
- ** All doors and windows providing direct access from the home to the pool will be equipped with an exit alarm that has a minimum sound pressure rating of 85 decibels at 10 feet;
- ** All doors providing direct access from the home to the pool will be equipped with a self-closing, self-catching device with a release mechanism placed no lower than 54" above the floor or deck.

I understand that not having one of the above installed at the time of final inspection will constitute a violation of Chapter 515 F.S., and will be considered as committing a misdemeanor of the second degree.

OWNER'S SIGNATURE

ADVANTAGE POOLS

OF LOT 1, BLOCK B, OAKHAVEN UNIT 2, PLAT BOOK 5, PAGES 86-86A, COLUMBIA COUNTY, FLORIDA

