

Columbia County Remodel Permit Application

For Office Use Only Application # 1908-95 Date Received 8/26 By [Signature] Permit # 3855 Z
 Zoning Official T.C. Date 8-27-19 Flood Zone X Land Use Res. Zoning RSF/MSH2
 FEMA Map # N/A Elevation N/A MFE N/A River N/A Plans Examiner T.C. Date 8-27-19
 Comments Interior Bath Remodel only
☒ NOC ☐ Deed or PA ☐ Dev Permit # _____ ☐ In Floodway ☒ Letter of Auth. from Contractor
☐ F W Comp. letter ☐ Owner Builder Disclosure Statement ☐ Land Owner Affidavit ☐ Ellisville Water ☒ App Fee Paid
☐ Site Plan ☐ Env. Health Approval _____ ☐ Sub VF Form _____ ELECTRICIAN ALL

Applicant (Who will sign/pickup the permit) Jason Waters Fax _____ Phone 352-339-4021

Address 16407 NW 174th Dr. Ste E Alachua, FL 32615

Owners Name Pauline Hattenstein Phone 386-365-7343

911 Address 274 SE Oak Hill Street Lake City, FL 32025

Contractors Name Chris Tanner - Phone 352-949-9072

Address 16407 NW 174th Dr. Ste E Alachua, FL 32615

Contractor Email tannerconstructiongroup@gmail.com ***Include to get updates on this job.

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address _____

Mortgage Lenders Name & Address _____

Circle the correct power company ☐ FL Power & Light ☐ Clay Elec. ☐ Suwannee Valley Elec. ☐ Duke Energy

Property ID Number 03-4S-17-07530-000 Estimated Construction Cost \$19,475.00

Subdivision Name Oak Hill Estates Lot 6 Block 5 Unit _____ Phase _____

Driving Directions from a Major Road Driving East on US-90, turn Right onto S Avalon Ave/SE Country Club Rd for 0.6 miles, Turn Left onto Oak Hill St for 0.2 mi, home on the Right.

Construction of Bathroom Renovation _____ Commercial OR X Residential

Type of Structure (House; Mobile Home; Garage; Exxon) House

Use/Occupancy of the building now Residential Single Family Dwelling Is this changing No

If Yes, Explain, Proposed Use/Occupancy N/A

Is the building Fire Sprinkled? No If Yes, blueprints included _____ Or Explain _____

Entrance Changes (Ingress/Egress) No If Yes, Explain _____

Zoning Applications applied for (Site & Development Plan, Special Exception, etc.) _____

Per Sent Email 8.29.19 & 8.30.19

Columbia County Building Permit Application

CODE: Florida Building Code 2017 6th Edition and the 2014 National Electrical Code.

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.

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 pursued in good faith or a permit has been issued.

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 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. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

Pauline Hattenstein

Print Owners Name

Pauline F. Hattenstein

Owners Signature

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

****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.

Christopher

Contractor's Signature

Contractor's License Number CBC1261700

Columbia County

Competency Card Number 001885

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 10th day of July 2019.

Personally known or Produced Identification FL Drivers License

Jodie L. Waters

SEAL:

State of Florida Notary Signature (For the Contractor)



Jodie L. Waters
NOTARY PUBLIC
STATE OF FLORIDA
Comm# GG231801
Expires 6/25/2022

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

03-4S-17-07530-000

Clerk's Office Stamp

Inst: 201912019820 Date: 08/26/2019 Time: 11:40AM
Page 1 of 1 B: 1392 P: 128. P.DeWitt Cason, Clerk of Court Colum
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): LOT 6 BLOCK 5 OAK HILL ESTATES S/D REPLAT. DC 1377-303 LE 1377-304
a) Street (job) Address: 274 SE Oak Hill Street Lake City, Florida 32025
2. General description of improvements: Bathroom Renovation
3. Owner information or Lessee information if the Lessee contracted for the improvements:
a) Name and address: Pauline Hattenstein - 274 SE Oak Hill Street Lake City, Florida 32025
b) Name and address of fee simple titleholder (if other than owner) _____
c) Interest in property: Owner
4. Contractor Information
a) Name and address: Chris Tanner - Tanner Construction Group - 16407 NW 174th Dr. Ste E Alachua, FL 32615
b) Telephone No.: 352-949-9072
5. Surety Information (if applicable, a copy of the payment bond is attached):
a) Name and address: N/A
b) Amount of Bond: N/A
c) Telephone No.: N/A
6. Lender
a) Name and address: N/A
b) Phone No.: N/A
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: N/A
b) Telephone No.: N/A
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(1)(b), Florida Statutes:
a) Name: N/A OF N/A
b) Telephone No.: N/A
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): N/A

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.

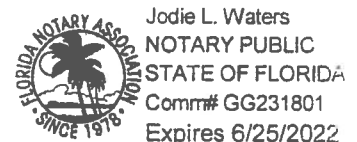
STATE OF FLORIDA
COUNTY OF COLUMBIA

10. Pauline Hattenstein
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Pauline Hattenstein - Owner
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 10th day of July, 20 19, by:
Pauline Hattenstein as Owner for Tanner Construction Group LLC
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

Personally Known _____ OR Produced Identification X Type FL Drivers License

Notary Signature Jodie L. Waters Notary Stamp or Seal:



SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # 1908-95 JOB NAME Hattenstein

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

Columbia County issues combination permits. One permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the general contractors permit.

NOTE: It shall be the responsibility of the general contractor to make sure that all of the subcontractors are licensed with the Columbia County Building Department.

Use website to confirm licenses: <http://www.columbiacountyfla.com/PermitSearch/ContractorSearch.aspx>

NOTE: If this should change prior to completion of the project, it is your responsibility to have a corrected form submitted to our office, before that work has begun.

Violations will result in stop work orders and/or fines.

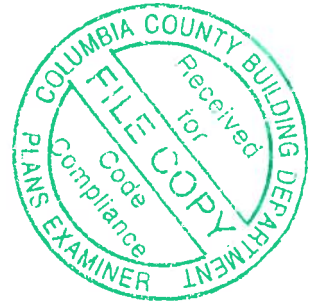
ELECTRICAL <input type="checkbox"/> CC# _____	Print Name <u>Wickus Diedericks</u> Signature _____ Company Name: <u>Del Sol Electric</u> License #: <u>EC13004859</u> Phone #: <u>352-514-2177</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
MECHANICAL/ A/C <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
PLUMBING/ GAS <input checked="" type="checkbox"/> CC# <u>1502</u>	Print Name <u>Jeff Kempton</u> Signature <u>Jeff Kempton</u> Company Name: <u>Kempton + Self Plumbing Services</u> License #: <u>CFC 057773</u> Phone #: <u>352-378-1812</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
ROOFING <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SHEET METAL <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
FIRE SYSTEM/ SPRINKLER <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SOLAR <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
STATE SPECIALTY <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE



16407 NW 174th Dr. Suite E Alachua, FL 32615

386-418-0001

Scope of Work



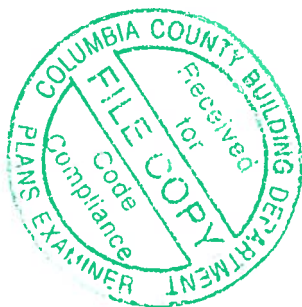
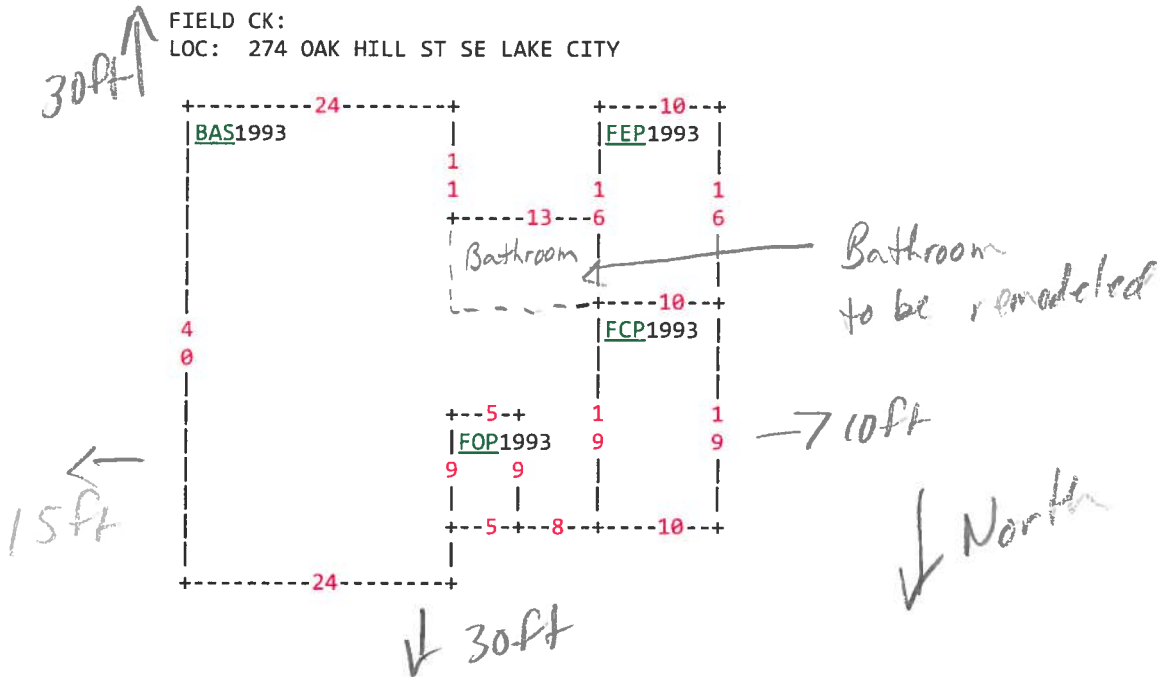
Project: Pauline Hattenstein

274 SE Oak Hill Street

Lake City, FL 32025

Tanner Construction Group will reposition the shower, toilet, and vanity. We will make all necessary plumbing and electrical upgrades.

Owner & Property Info				Parcel ID: 03-4S-17-07530-000 HX H3 98		
Name	HATTENSTEIN PAULINE C					
Site Addr	274 OAK HILL ST, LAKE CITY					
Mailing	P O BOX 1132 LAKE CITY, FL 320561132					
Description	LOT 6 BLOCK 5 OAK HILL ESTATES S/D REPLAT. DC 1377-303, LE 1377-304					
	Bldg Item	Bldg Desc	Year Blt	Base S.F.	Actual S.F.	Bldg Value
Show Sub-Area Codes	1	SINGLE FAM (000100)	1963	1227	1622	\$60,754.00



Columbia County Property Appraiser

updated: 8/14/2019

2019 Preliminary Certified Values

Parcel: 03-4S-17-07530-000

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

<< Next Lower Parcel

Next Higher Parcel >>

2019 TRIM (pdf)

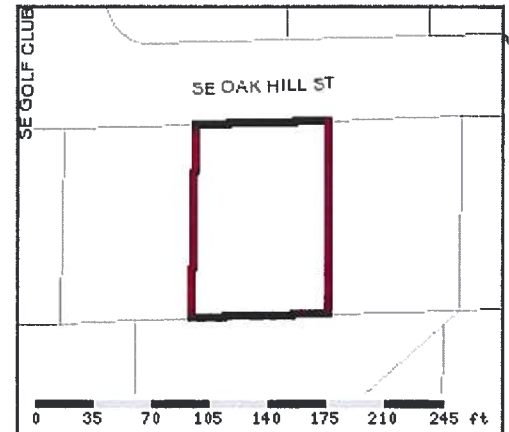
Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	HATTENSTEIN PAULINE C		
Mailing Address	P O BOX 1132 LAKE CITY, FL 32056-1132		
Site Address	274 SE OAK HILL ST		
Use Desc. (code)	SINGLE FAM (000100)		
Tax District	2 (County)	Neighborhood	3417
Land Area	0.211 ACRES	Market Area	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 6 BLOCK 5 OAK HILL ESTATES S/D REPLAT. DC 1377-303, LE 1377-304			



Property & Assessment Values

2018 Certified Values		
Mkt Land Value	cnt: (0)	\$10,720.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (1)	\$51,328.00
XFOB Value	cnt: (5)	\$1,650.00
Total Appraised Value		\$63,698.00
Just Value		\$63,698.00
Class Value		\$0.00
Assessed Value		\$46,857.00
Exempt Value	(code: HX H3 98)	\$46,857.00
Total Taxable Value	Cnty: \$0 Other: \$0 Schl: \$0	

2019 Working Values (H3 Values)		
Mkt Land Value	cnt: (0)	\$10,720.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (1)	\$60,754.00
XFOB Value	cnt: (5)	\$1,650.00
Total Appraised Value		\$73,124.00
Just Value		\$73,124.00
Class Value		\$0.00
Assessed Value		\$47,747.00
Exempt Value	(code: HX H3 98)	\$47,747.00
Total Taxable Value	Cnty: \$0 Other: \$0 Schl: \$0	

NOTE: 2019 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
1/24/2019	1377/304	LE	I	U	14	\$100.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1963	CONC BLOCK (15)	1227	1622	\$60,754.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0166	CONC,PAVMT	0	\$200.00	0000001.000	0 x 0 x 0	(000.00)
0294	SHED WOOD/	0	\$400.00	0000001.000	10 x 12 x 0	(000.00)
0296	SHED METAL	1993	\$600.00	0000001.000	12 x 14 x 0	(000.00)
0120	CLFENCE 4	1993	\$300.00	0000001.000	0 x 0 x 0	(000.00)
0166	CONC,PAVMT	2012	\$150.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000100	SFR (MKT)	1 LT - (0000000.211AC)	1.00/1.00/1.00/1.00	\$10,720.00	\$10,720.00

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ELECTRICAL <input checked="" type="checkbox"/>	Print Name <u>Wigberto Baez</u> Signature <u>[Signature]</u>	Need: <input checked="" type="checkbox"/> Lic <input checked="" type="checkbox"/> Lab <input checked="" type="checkbox"/> W/C <input checked="" type="checkbox"/> EX <input checked="" type="checkbox"/> DE
CC# <u>1396</u>	Company Name: <u>Del Sol Electric, LLC</u> License #: <u>EC 13004859</u> Phone #: <u>352-514-2177</u>	
MECHANICAL/A/C <input type="checkbox"/>	Print Name _____ Signature _____	Need: <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
CC# _____	Company Name: _____ License #: _____ Phone #: _____	
PLUMBING/GAS <input type="checkbox"/>	Print Name _____ Signature _____	Need: <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
CC# _____	Company Name: _____ License #: _____ Phone #: _____	
ROOFING <input type="checkbox"/>	Print Name _____ Signature _____	Need: <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
CC# _____	Company Name: _____ License #: _____ Phone #: _____	
SHEET METAL <input type="checkbox"/>	Print Name _____ Signature _____	Need: <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
CC# _____	Company Name: _____ License #: _____ Phone #: _____	
FIRE SYSTEM/SPRINKLER <input type="checkbox"/>	Print Name _____ Signature _____	Need: <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
CC# _____	Company Name: _____ License #: _____ Phone #: _____	
SOLAR <input type="checkbox"/>	Print Name _____ Signature _____	Need: <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
CC# _____	Company Name: _____ License #: _____ Phone #: _____	
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