-	2004	Columbia	a County	<b>Building Po</b>	ermit	<b>PERMIT</b>		
This Permit Expires One Yes					000022437			
STATE OF THE STATE		ARLEE ROAD		PHONE JACKSONVILL	904.317.8215	FL 32222		
	NEAL J. LIVI		<u> </u>	PHONE	904.317.8215	<u>FL</u> <u>32222</u>		
VI VIDANIBOTA SALSANSAN	Appropriate Approp	W SPRADLEY ROA	D.	LAKE CITY	904.317.0213	FL 32055		
CONTRACTOR		R BUILDER	<u> </u>	PHONE	904.312.8215	FL 32033		
			OV 10 MILES EDON			PROY		
LOCATION OF PROPERTY  441-N APPROX. 10 MILES FROM 90 WEST OF SPRADLEY ROAD, APPROX  3/4 MILE TO PROPERTY								
TYPE DEVELO	PMENT	METAL BLDG	EST	TIMATED COST OF CO	NSTRUCTION	26000.00		
HEATED FLOC	OR AREA		TOTAL ARE	EA1200.00	HEIGHT _	.00 STORIES		
FOUNDATION		WALLS	R	ROOF PITCH	FL	OOR		
LAND USE & Z	ONING	A-3		MAX	. HEIGHT 3	35		
Minimum Set Ba	ack Requirmen	nts: STREET-FRO	ONT 30.00	REAR	25.00	SIDE		
NO. EX.D.U.	0	FLOOD ZONE	X	DEVELOPMENT PER	MIT NO.			
PARCEL ID	29-1S-17-0459	97-000	SUBDIVISION	N		1		
LOT	BLOCK	PHASE	UNIT	тотл	AL ACRES 56	.00		
				1)	X			
				W	M			
Culvert Permit No			ractor's License Num		Applicant/Owner/	Contractor		
EXISTING		-0266-N	BLK	<del></del>	RTJ C	e New Resident		
Driveway Connec	1 FOOT ABO	otic Tank Number	LU & Zonin	ng checked by App	roved for Issuanc	e New Resident		
COMMENTS:	I FUMIL ADU							
	110011100	VE KOAD.						
		VE ROAD.			Check # or Ca	ash 1150		
			DING 9 ZONIN	IC DEDARTMENT	Check # or Ca	ash 1150		
				IG DEPARTMENT	ONLY	ash 1150 (footer/Slab)		
Temporary Powe	т	FOR BUIL	DING & ZONIN Foundation		Company and the Company of the Compa	(footer/Slab)		
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	rda	FOR BUIL	Foundation Slab		ONLY  Monolithic	(footer/Slab)		
Temporary Powe	rda da n-in plumbing	FOR BUIL  ate/app. by  date/app. b	Foundation Slab	date/app. by	ONLY  Monolithic  Sheathing/	(footer/Slab)  date/app. by  Nailing		
Temporary Powe Under slab rough	r da dai-in plumbing date/app. by	FOR BUIL  ate/app. by  date/app. b	Foundation Slab	date/app. by	ONLY  Monolithic  Sheathing/	(footer/Slab)  date/app. by  Nailing		
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Temporary Powe  Under slab rough  Framing  Electrical rough-  Permanent power  M/H tie downs, bir  Reconnection  M/H Pole	date/app. by date/ap	FOR BUIL  ate/app. by  date/app. b  Re/app. by  pp. by  icity and plumbing	Foundation  Slab  Slab  Oy  Ough-in plumbing about  Heat & Air Duct  C.O. Final  date/app.  Pump pole  Trailer	date/app. by  date/app. by  ove slab and below wood  date/app. by  late/app. by  Utility Po	ONLY  Monolithic Sheathing/  I floor  Peri. beam (Linte  Culvert  Pool	(footer/Slab)  date/app. by  Nailing		
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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.

Columbia County Building Permit Application
For Office Use Only Application # 0409 - 08 Date Received 9/3/04 By W Permit # 22437
Application Approved by - Zoning Official 64 Date 30.07.61 Plans Examiner Date
Flood Zone Development Permit NA Zoning A-3 Land Use Plan Map Category A-3
Comments NOC - Signo En. XCITH PLAN ISPECT
Applicants Name NEAL J. LEVITSKY Phone 904 317 8215  Address 9006 MARLEE RD JACKSONIVIUE FL 32222
Owners Name NEAL J. LEVITSKY Phone 904 317 8215
911 Address 921 NW SPRADLEY RD LAKE CITY, FL. 32055
Contractors Name SELF Phone
Address
Fee Simple Owner Name & Address
Bonding Co. Name & Address NA
Architect/Engineer Name & Address CHAM P. O.J BULDINGS, INC. WILKSBORD, NC 2869
Mortgage Lenders Name & Address NAME Address
Property ID Number 29-15-17-04597-000 Estimated Cost of Construction 26,000  Subdivision Name NA Lot Block Unit Phase  Driving Directions 441 NORTH APRX 10 MILES FROM 90  WEST ON SPRADLET APRX 75 MILE TO  PROPERTY  Type of Construction METAL BLD ON SLAZ Number of Existing Dwellings on Property  Total Acreage 56 Lot Size Do you need a - Culvert Permit or Culvert Walver or Have an Existing Dr  Actual Distance of Structure from Property Lines - Front 2001 Side 1000 Side 300 Rear 1600  Total Building Height 176 Number of Stories Heated Floor Area O Roof Pitch
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 COMMENCMENT 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)  SAAVE  Contractor Signature  STATE OF FLORIDA  Competency Card Number
Sworn to (or affirmed) and subscribed before the August 2, 2008
Sworn to (or affirmed) and subscribed before the #DD342971 FOR NOTARY STAMP/SEAL
Personally known or Produced Identification Usin STATE Of STAT
this day of or Produced Identification Util STATE OF



## DEPARTMENT OF HEALTH

-- PART II - SITE PLAN----

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 3-02667

Scale: Each block represents 5 feet and 1 inch = 50 feet. 1600 Notes: Site Plan submitted by Not Approved Plan Approved County Health Department By. ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT DH 4015, 10/96 (Replaces HRS-H Form 4015 which may be used) (Stock Number: 5744-002-4015-6) Page 2 of 3 Recording Fees: \$ Documentary Stamps:

Prepared By And Return To:

TITLE OFFICES, LLC 1089 SW MAIN BLVD LAKE CITY, FL.. 32025

File #03Y-01005BS/Brenda Styons

Property Appraisers Parcel I.D. Number(s): 04597-000 AND 04597-001

Inst: 2003005539 Date: 03/18/2003 Time: 12:50 Doc Stamp-Deed : 875.00 DC, P. DeWitt Cason, Columbia County B:977 P:1674

WARRANTY DEED

day of March, 2003 by THIS WARRANTY DEED made and executed the HARLES W. BUCKLES and ALENE BUCKLES, HIS WIFE , hereinafter called the Grantor, to A MARRIED COUPLE, whose post office address is: NEAL J. LEVITSKY and LINDA M. ADCOCK, 2148 Lake Shore Blud. JACKSONVILLE, FL 32210

hereinafter called the Grantee:

(Wherever used herein the terms "Grantor" and "Grantee" shall include singular and plural, heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

WITNESSETH: That the Grantor, for and in consideration of the sum of TEN DOLLARS (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, by these presents does grant, bargain, sell, alien, remise, release, convey and confirm unto the Grantee all that certain land situate, lying and being in COLUMBIA County, State of Florida, viz:

The Northwest 1/4 of the Southeast 1/4 and that part of the Southwest 1/4 of the Southeast 1/4 lying Northerly of the Northeasterly maintained right of way line of Spradley Road (a county maintained road), in Section 29, Township 1 South, Range 17 East, Columbia County, Florida.

If this box is checked, the Grantor warrants that the above described property is not his/her constitutional homestead as defined by the laws of the State of Florida. He/she resides at St., Lynn Howen, FL 32444. 2233 Sewance

TOGETHER with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

TO HAVE AND TO HOLD the same in fee simple forever.

AND the Grantor hereby covenants with said Grantee that the Grantor is lawfully seized of said land in fee simple; that the Grantor has good right and lawful authority to sell and convey said land, and hereby warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except easements, restrictions and reservations of record, if any, and taxes accruing subsequent to December 31, 2002.

IN WITNESS WHEREOF, the said Grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in the presence of

Witness

Witness:

STATE OF FLORIDA COUNTY OF COLUMBIA

BUCKLES Address:2233 Sewanee St.

Lynn Haven, FL 32444

ALENE BUCKLES

Address: 2233 Sewanee St. Lynn Haven, FL 32444

I hereby certify that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared <a href="CHARLES W">CHARLES W</a>. BUCKLES and ALENE BUCKLES, HIS WIFE, who produced the identification described below, and who acknowledged before me that they executed the foregoing instrument. Witness my hand and official seal in the county and state aforesaid this / day of March, 2003.

Notary Public

Identification Examined: H

JOYCE L. KIRPACH Notary Public, State of Florida My comm. exp. Apr. 20, 2004 Comm. No. CC930018

## NOTICE OF COMMENCEMENT FORM COLUMBIA COUNTY, FLORIDA

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.

Tax Parcel ID Number 29-15-17-04597-000/0

	Inst:2004027624 Date:12/13/2004 Time:13:17
	DC,P. DeWitt Cason,Columbia County B:1032 P:27
941 NW SPRADLEY RD	, LARE CITY, FL 32055
	METAL BUILDING
. Owner Name & Address <u>バモみ</u> L	J. LEVITSKY 9006 MARLEE RD
· · · · · · · · · · · · · · · · · · ·	222 Interest in Property 100 70 WIWIFE
	(if other than owner):
. Contractor Name SELF	Phone Number
Address	
	Phone Number
	Phone Number
Address	
erved as provided by section 718.13 (1)(a	signated by the Owner upon whom notices or other documents may be a) 7; Florida Statutes: Phone Number
Address	
	er designates of
	receive a copy of the Lienor's Notice as provided in Section 713.13 (1) -
(a) 7. Phone Number of the designee	
	nencement (the expiration date is 1 (one) year from the date of recording,
(Unless a different date is specified)	
,	
OTICE AS PER CHAPTER,713, Florida St	
ne owner must sign the notice of comme	encement and no one else may be permitted to sign in his/her stead.
	Sworn to (or affirmed) and subscribed before day of
	NOTARY STAMP/SEAL BOOK EVIN INSURVINCE INC.
Signature of Owner FLOK	WA COMMISSION * DDS8902\ KNACOUNE OSPOLU  KNACOUNE OSPOLU

Notice of Treatment —								
Applicator Florida Pest Control & Chemical Co.								
Address 530 May 1/4								
City		Phon	e 752-1783					
Site Location Subdivision_								
Lot# Block# Permit# 22437								
Address 941 NN Spindley RD.								
AREAS TREATED								
			Print Technician's					
Area Treated	Date	Time Gal.	Name					
Main Body	12-16-04	900-180	Andy P.					
Patio/s #								
Stoop/s #								
Porch/s #		A TOURS						
Brick Veneer								
Extension Walls								
A/C Pad								
Walk/s #								
Exterior of Foundation								
Driveway Apron								
Out Building								
Tub Trap/s								
(OI)								
(Other)								
Name of Product Applied Dursban TC 15%  Remarks Exterior perimeter not complete								

Applicator - White . Permit File - Canary . Permit Holder Dink