This Permit Must Be Prominently Posted of	uilding Permit PERMIT
APPLICANT PAUL MCDANIEL	PHONE 386.752.4072
ADDRESS 2230 SE BAYA DR., ,STE. 101	LAKE CITY FL 32025
OWNER AMY C. PLATON & SCOTT CRAWFORD	PHONE <u>772.528.2543</u>
ADDRESS 325 SW LEISRUE DR	LAKE CITY FL 32025
CONTRACTOR L. DON REED	PHONE 386.752.4072
LOCATION OF PROPERTY 90-W TO SR. 247-S.TL TO LEISU ON L.(MULTI-DWELLING)	JRE.TL AND IT'S THE 5TH PLACE
	TIMATED COST OF CONSTRUCTION 9900.00
HEATED FLOOR AREA TOTAL ARE	A HEIGHT STORIES
FOUNDATION WALLS R	OOF PITCH 5'12 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 01-4S-16-02678-020 SUBDIVISION	N
LOT BLOCK PHASE UNIT	TOTAL ACRES
CCC1330117	P-PNID IP
Culvert Permit No. Culvert Waiver Contractor's License Num	
EXISTING	JLW N
Driveway Connection Septic Tank Number LU & Zonin	ng checked by Approved for Issuance New Resident
COMMENTS: NOC ON FILE.	
	61 1 1 6 1 12(0
	Check # or Cash 1269
FOR BUILDING & ZONIN	
Temporary Power Foundation	IG DEPARTMENT ONLY (footer/Slab) Monolithic
Temporary Power Foundation date/app. by	IG DEPARTMENT ONLY (footer/Slab) Monolithic date/app. by
Temporary Power Foundation date/app. by Under slab rough-in plumbing Slab	Monolithic date/app. by Sheathing/Nailing (footer/Slab)
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"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."

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.