

DATE 04/27/2006

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000024442

APPLICANT THOMAS SOLBERG PHONE 352 472-8484
ADDRESS 18308 SW 15TH AVE NEWBERRY FL 32669
OWNER ABRAHAM & PAMELA PALLAS PHONE
ADDRESS 143 SW CEDARWOOD GLEN LAKE CITY FL 32055
CONTRACTOR PARADISE POOL COMPANY PHONE 352 472-8484
LOCATION OF PROPERTY 441S, TR ON CR 349, TL ON CHERRYWOOD WAY, CORNER OF
CHERRYWOOD AND CEDARWOOD GLEN ON RIGHT

TYPE DEVELOPMENT SWIMMING POOL ESTIMATED COST OF CONSTRUCTION 20000.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING A-3 MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. FLOOD ZONE NA DEVELOPMENT PERMIT NO.

PARCEL ID 27-5S-17-09415-120 SUBDIVISION MAGNOLIA PLACE
LOT 20 BLOCK PHASE UNIT TOTAL ACRES

CPC1456716
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING X06-0133N BK JH N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: NOC ON FILE

Check # or Cash 1069

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
Framing Rough-in plumbing above slab and below wood floor date/app. by
Electrical rough-in Heat & Air Duct Peri. beam (Lintel) date/app. by
Permanent power C.O. Final Culvert date/app. by
M/H tie downs, blocking, electricity and plumbing Pool date/app. by
Reconnection Pump pole Utility Pole date/app. by
M/H Pole Travel Trailer Re-roof date/app. by

BUILDING PERMIT FEE \$ 100.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 0.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE 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 INCONVENIENCE, 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.

left message
4/26/06

Columbia County Building Permit Application

Revised 9-23-04

For Office Use Only	Application # <u>0604-62</u>	Date Received <u>4/21</u>	By <u>JW</u>	Permit # <u>24442</u>
Application Approved by - Zoning Official <u>BLK</u>		Date <u>24.04.06</u>	Plans Examiner <u>OK JH</u>	Date <u>4-29-06</u>
Flood Zone <u>N/A</u>	Development Permit <u>N/A</u>	Zoning <u>A-3</u>	Land Use Plan Map Category <u>A-3</u>	
Comments _____				

Applicants Name Thomas Solberg Phone 352-472-8484
Address 18308 SW 15th Ave Newberry, FL 32669
Owners Name Abraham & Pamela Pallas Phone 352-472-8484
911 Address 143 SW Cypress Wood Glen, Lake City Florida
Contractors Name Paradise Pool Company of Gville Phone 352-472-8484
Address 18308 SW 15th Ave, Newberry, FL 32669
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. - Progressive Energy
Property ID Number 27-55-17-09415-120 Estimated Cost of Construction 20,000
Subdivision Name Magnolia Place Lot 20 Block _____ Unit _____ Phase _____
Driving Directions 441 S, TR ON CR 349 ON Cherrywood way on corner of Cypress wood Glen on Right Cedarwood Glen

Type of Construction Concrete Swimming Pool Number of Existing Dwellings on Property 1
Total Acreage _____ Lot Size _____ Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
Actual Distance of Structure from Property Lines - Front 174' Side 128' Side 255' Rear 300' +/-
Total Building Height _____ Number of Stories _____ Heated Floor Area _____ 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 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.

Owner Builder or Agent (Including Contractor) _____

STATE OF FLORIDA
COUNTY OF COLUMBIA ALACHUA

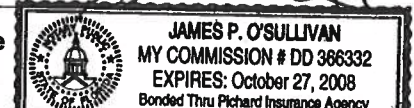
Sworn to (or affirmed) and subscribed before me

this 21 day of APRIL 20 06.

Personally known _____ or Produced Identification FLD44
5416 824694650 12.15.08

Contractor Signature _____
Contractors License Number CPC1456716
Competency Card Number _____
NOTARY STAMP/SEAL

Notary Signature _____



NOTICE OF COMMENCEMENT

PERMIT NUMBER: _____

STATE OF FLORIDA COUNTY OF: Columbia

CITY OF: Lake City

THE UNDERSIGNED HEREBY gives notice that improvement(s) 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.

DESCRIPTION OF PROPERTY

LOT: 20 BLOCK: _____ SECTION: 27 TOWNSHIP: 5 South RANGE: 17 East

TAX PARCEL NUMBER: 27-55-17-0945-120

SUBDIVISION: Magnolia Place PLATBOOK: 7 MAP PAGE: 174-179

STREET ADDRESS: 143 SW Cypresswood Glen Lake City, FL 32025

GENERAL DESCRIPTION OF IMPROVEMENTS

TO CONSTRUCT: Swimming Pool

OWNER INFORMATION

OWNER NAME: Abraham I and Pamela J. Pallas

ADDRESS: 143 SW Cypresswood Glen

PHONE NUMBER: _____

CITY: Lake City

STATE: FL

ZIP CODE: 32025

INTEREST IN PROPERTY: _____

FEE SIMPLE TITLEHOLDER NAME: _____

FEE SIMPLE TITLEHOLDER ADDRESS: _____

Inst: 2006009739 Date: 04/21/2006 Time: 11:42

1.7 DC, P. DeWitt Cason, Columbia County B: 1081 P: 746

(If other than owner)

CONTRACTOR NAME: PARADISE POOL COMPANY OF GAINESVILLE

ADDRESS: 18308 SW 15TH AVENUE

PHONE NUMBER: 352-472-8484

CITY: NEWBERRY

STATE: FLORIDA

ZIP CODE: 32669

BONDING COMPANY: _____

ADDRESS: _____

PHONE NUMBER: _____

CITY: _____

STATE: _____

ZIP CODE: _____

LENDER NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

CITY: _____

STATE: _____

ZIP CODE: _____

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: _____

In addition to himself, Owner designates _____

of _____ to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes. Expiration date is one (1) year from date of recording unless a different date is specified.

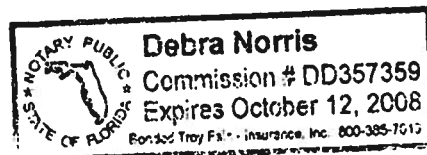
SIGNATURE OF OWNER: Abraham Pallas

Pamela J. Pallas

SWORN to and subscribed before me this 24th day of October, A.D. 2005.

Notary Public: Debra Norris

My commission expires: _____



DATE 08/09/2005

Columbia County Building Permit**PERMIT****This Permit Expires One Year From the Date of Issue****000023478**

APPLICANT LEAH MCCRAE

PHONE 752-1014

ADDRESS 180 AMENITY CT

LAKE CITY

FL 32055

OWNER ABRAHAM PALLAS

PHONE

ADDRESS 143 SW CYPRESSWOOD GLENN

LAKE CITY

FL 32025

CONTRACTOR UNIQUE POOLS & SPAS

PHONE 752-1014

LOCATION OF PROPERTY 441 S, TR ON CR 349, TL ON CHERRYWOOD WAY, ON CORNER OF
CYPRESSWOOD GLENN ON RIGHT

TYPE DEVELOPMENT SWIMMING POOL

ESTIMATED COST OF CONSTRUCTION

18000.00

HEATED FLOOR AREA

TOTAL AREA

HEIGHT 0.00

STORIES

FOUNDATION

WALLS

ROOF PITCH

FLOOR

LAND USE & ZONING

A-3

MAX. HEIGHT

Minimum Set Back Requirements:

STREET-FRONT

30.00

REAR

25.00

SIDE

25.00

NO. EX.D.U.

0

FLOOD ZONE

NA

DEVELOPMENT PERMIT NO.

PARCEL ID 27-5S-17-09415-120

SUBDIVISION

MAGNOLIA PLACE

LOT 20

BLOCK

PHASE

UNIT

TOTAL ACRES

CPC1456899

Culvert Permit No.

Culvert Waiver

Contractor's License Number

Applicant/Owner/Contractor

EXISTING

X05-0203

BK

HD

N

Driveway Connection

Septic Tank Number

LU & Zoning checked by

Approved for Issuance

New Resident

COMMENTS: NOC ON FILE

Check # or Cash 1828

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

date/app. by

Pool

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

@ CAM112M01	CamaUSA Appraisal System		Columbia County
4/21/2006 11:46	Legal Description Maintenance	39900	Land 001
Year T Property	Sel		AG 000
2006 R 27-5S-17-09415-120		232861	Bldg 001
143 CYPRESSWOOD GLN SW LAKE CITY		3360	Xfea 001
HX PALLAS ABRAHAM I & PAMELA J		276121	TOTAL B

1	LOT 20, MAGNOLIA PLACE S/D	WD 1017-1253,, WD 1033-2923,,	2
3			4
5			6
7			8
9			10
11			12
13			14
15			16
17			18
19			20
21			22
23			24
25			26
27			28

Mnt 1/05/2005 KYLIE

F1=Task F3=Exit F4=Prompt F10=GoTo PgUp/PgDn F24=More

Columbia County, Florida

PERMIT NUMBER _____

Residential Swimming Pool, Spa and Hot Tub Safety Act Requirement

I, Thomas Solberg, License # CPC1456716
hereby affirm that one of the following methods will be used to meet the requirements of
Chapter 515, Florida Statutes.

_____ The pool will isolated from access to the home by an enclosure that meets
the pool barrier requirements of Florida Statute 515.29;

_____ The pool will be quipped 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 door 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, punishable as provided in section 775.082 or
section 775.083 F.S.**


Contractor Signature

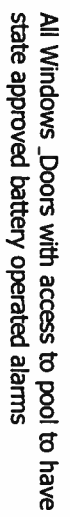

Abraham Pallas
Owner's Signature

Abraham Pallas
Owner's Name (Please Print)

Equipment

7' 8"

16' 5"



8' 9"

Scale: 1/8 in. per ft.



STATE OF FLORIDA AC# 1430388
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

CPC1456716 06/01/04 030695175

CERT RESIDENTIAL POOL/SPA CONTR
SOLBERG, THOMAS DAVID
PARADISE POOL COMPANY OF GAINESVI

IS CERTIFIED under the provisions of Ch.489 FS.
Expiration date: AUG 31, 2006 L04060101052