

DATE 03/17/2008

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000026852

APPLICANT SUSAN SHORT PHONE 352.472.4943
ADDRESS POB 367 NEWBERRY FL 32668
OWNER JOSEPH & SUZANNE ADKINS PHONE 386.755.7997
ADDRESS 657 LLWELLYN AVENUE LAKE CITY FL 32055
CONTRACTOR MAC JOHNSON PHONE 352.472.4943
LOCATION OF PROPERTY EAST BAYA TO LLEWELLYN AVE,TR TO END ON L AND IT'S THE
9TH PROPERTY ON L FROM BAYA DR.
TYPE DEVELOPMENT REROOF ON SFD ESTIMATED COST OF CONSTRUCTION 4876.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH 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 03-4S-17-07548-000 SUBDIVISION OAKHILL EST. REPLAT
LOT 1 BLOCK 6 PHASE UNIT TOTAL ACRES

RC0061384
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor Susan Short
EXISTING X-08-081 JLW N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: NOC ON FILE.

Check # or Cash 4975

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 \$ 25.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 0.00 ZONING CERT. FEE \$ FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ CULVERT FEE \$ TOTAL FEE 25.00
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."

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 TO BE IN ACTIVE PROGRESS WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

NOTICE OF COMMENCEMENT

This Instrument Prepared By:

Name: SUSAN SHORT

Address: PO BOX 367 Newberry, FL 32669

Permit No: _____

Tax Folio No: 03-45-17-07548-000HX

STATE OF: FLORIDA

COUNTY OF: ALACHUA

Inst: 200812005205 Date: 3/17/2008 Time: 10:46 AM

27 DC, P. DeWitt Cason, Columbia County Page 1 of 1

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.

1. DESCRIPTION OF PROPERTY: Street Address: 657 Llewellyn Ave Lake City FL 32055

Legal Description: Lot 1 Block 6 Oak Hill Estates Replat S/D ORB 667-444 741-1328

2. GENERAL DESCRIPTION OF IMPROVEMENT(S): RE-ROOF Shingle house

3. OWNER INFORMATION: a.) Name: Joseph N + Suzanne Adkins Address: 697 SE Llewellyn Ave. Lake City FL 32055

b.) Interest in Property: owner

c.) Fee Simple Titleholder (if other than owner) Name: N/A

Address: _____

4. CONTRACTOR: a.) Name: Mike C Johnson Address: PO BOX 367 Newberry, FL 32669 b.) Phone: 352-472-4943

5. SURETY: a.) Name: N/A

Address: _____

b.) Amount of bond \$: N/A

c.) Phone: _____

6. LENDER: a.) Name: N/A

Address: _____

b.) Phone: _____

7. 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:

a.) Name: N/A

Address: _____

b.) Phone: _____

8. In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

a.) Name: N/A

Address: _____

b.) Phone: _____

9. Expiration date of notice of commencement (the expiration date is one (1) year from the date of recording unless a different date is specified.) _____

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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

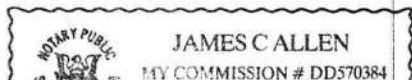
Suzanne Adkins
Signature of Owner or Owner's Authorized Officer/Director
Partner/Manager

Signatory's Title/ Office _____

The foregoing instrument was acknowledged before me this 25 day of February 2008 (year)

by Suzanne Adkins (name of person) as SELF (type of authority, e.g. officer,

trustee, attorney in fact) for _____ (name of party on behalf of whom instrument was executed).



James C. Allen
Signature of Notary Public - State of Florida
Print, Type, or Stamp Commissioned Name of Notary Public

Columbia County Building Permit Application

For Office Use Only Application # 0803-35 Date Received 3/17 By JW Permit # 26852
 Application Approved by - Zoning Official _____ Date _____ Plans Examiner _____ Date _____
 Flood Zone _____ Development Permit _____ Zoning _____ Land Use Plan Map Category _____
 Comments _____
☐ NOC ☐ EH ☐ Deed or PA ☐ Site Plan ☐ State Road Info ☐ Parent Parcel # ☐ Development Perm

Name Authorized Person Signing Permit Susan Short Fax 352-472-6371
 Address PO Box 367 Newberry FL 32669 Phone 352-472-4943
 Owners Name Joseph & Suzanne Adkins Phone 386-755-7997
 911 Address 657 Llewellyn Ave Lake City FL 32055
 Contractors Name McC Johnson Phone 352-472-4943
 Address PO Box 367 Newberry FL 32669
 Fee Simple Owner Name & Address N/A
 Bonding Co. Name & Address N/A
 Architect/Engineer Name & Address N/A
 Mortgage Lenders Name & Address _____

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Energy
 Property ID Number 03-45-17-07548-800THK Estimated Cost of Construction 4876-
 Division Name OAK Hill Lot 1 Block 6 Unit _____ Phase _____
 Driving Directions T/L NE Madison St T/L N Marion Ave (US441)
T/L on SE Baya Dr. T/R on SE Llewellyn Ave end at 657 on left
9th property on left from Baya Dr.
 Type of Construction Re Roof shingles house 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 _____ Side _____ Side _____ Rear _____
 Total Building Height _____ Number of Stories 1 Heated Floor Area _____ Roof Pitch 3/12

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 Authorized Person by Notarized Letter

STATE OF FLORIDA
 COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me

this 5th day of March 2009.

Personally known 1 or Produced Identification _____

Contractor Signature _____
 Contractors License Number RC0061384
 Competency Card Number _____

NOTARY STAMP/SEAL
 Tamara H. Malloy
 Commission # DD622094
 Expires: SEP. 05, 2010
 BONDED THRU ATLANTA BONDING CO., INC.

Notary Signature

Customer Order # 28984

MAC JOHNSON ROOFING, INC.

Gainesville (352) 379-4752

Fax (352) 472-6371

Newberry (352) 472-4943

P. O. Box 367 * Newberry, Florida 32669

STATE CERTIFIED * LICENSED & BONDED * INSURED
CCC-1325497 RC - 0061384

Lake City (386) 755-8311

Titusville (321) 385-3854

Tallahassee (850) 539-0067

1-866-376-4943

PROPOSAL SUBMITTED TO:		PHONE: <u>386-755-7997</u>	DATE: <u>1-22-08</u>
NAME: <u>SUZANNE ADKINS</u>	JOB NAME:		
STREET: <u>657 LLEWELLYN AVE</u>	STREET:		
CITY/STATE: <u>LAKE CITY, FL 32025</u>	CITY:		

We hereby submit specifications and estimates for:

Mac Johnson Roofing agrees to tear off entire roof down to workable surface, clean up and haul off all trash and debris.

New roof will consist of:

- | | | |
|--|--|------------------|
| <input checked="" type="checkbox"/> 1. New eave drip | <input checked="" type="checkbox"/> 5" <input type="checkbox"/> 6" <input type="checkbox"/> Woodgrain <input type="checkbox"/> White <input type="checkbox"/> Gray <input checked="" type="checkbox"/> Brown | |
| <input type="checkbox"/> 2. 30 lb. felt | <input checked="" type="checkbox"/> 15 lb. felt <u>DOUBLE W/ 1/2 LAP</u> | |
| <input checked="" type="checkbox"/> 3. Valley metal | | |
| <input type="checkbox"/> 4. Reflash chimney if needed | | |
| <input checked="" type="checkbox"/> 5. Lead pipe flashings | | |
| <input checked="" type="checkbox"/> 6. Cement all edges | | |
| <input checked="" type="checkbox"/> 7. 25 year algae resistant 3 Tab shingles | <u>60 MPH</u> | \$ <u>4896.-</u> |
| <input checked="" type="checkbox"/> 30 year algae resistant Architectural shingles | <u>70 MPH</u> | \$ <u>5216.-</u> |
| <input checked="" type="checkbox"/> 30 year Duration A/R Architectural shingles | <u>110 MPH</u> | \$ <u>5400.-</u> |
| <input type="checkbox"/> Lifetime Duration Premium shingles | | \$ _____ |
| <input type="checkbox"/> 8. Ridge vents | <u>N/A</u> | \$ _____ |
| <input type="checkbox"/> 9. Self-flashing skylights | <u>N/A</u> | \$ _____ |
| <input checked="" type="checkbox"/> 10. Low Slope Area of Roof | | \$ <u>900.-</u> |
| <input type="checkbox"/> 11. Preferred Contractor Extended Warranty | | \$ _____ |

Color Brown
Brownwood

Additional
 Additional
 Additional
 Additional

Any woodwork is additional, labor plus material.

Woodwork is \$ 38.- per man, per hour. Plywood is \$ 35.- per sheet. Includes labor.

Grounds will be magnetized.

Yard will be cleaned daily.

Comments: _____

10 yr. warranty on workmanshipNote: Per Code: Nails may penetrate decking. **Not responsible for gutter guards.**

We hereby propose to furnish labor and materials - complete in accordance with the above specifications, for the sum of:

_____ dollars (\$ _____)

with payment to be made upon completion of job.

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. This proposal subject to acceptance within 90 days and is void thereafter at the option of the undersigned.

Cell 352-339-2917AUTHORIZED SIGNATURE [Signature]

A carrying charge of 11/2% per month will be added to the unpaid balance after thirty (30) days.

The customer will be responsible for all reasonable costs of collection including attorney's fees.

ACCEPTANCE OF PROPOSAL

The above prices, specifications and conditions are hereby accepted. You are authorized to do the work as specified.

Payment will be made as outlined above.

ACCEPTED: 2-25-08SIGNATURE [Signature]

County
 house
 Shingle
 27¢



Columbia County Property Appraiser - Interactive Record Search & GIS Mapping System -

[New Search](#)
[Search Results](#)
[Parcel Details](#)
[GIS Map](#)
[Home](#)
[Property Search](#)
[GIS Map](#)
[Sales Report](#)
[Amendment 1 Inform](#)
[Tax Estimator](#)
[Homestead Fraud](#)
[Agriculture Classificat](#)
[Amendment 10](#)
[Exemptions](#)
[Tangible Property Tax](#)
[Tax Rates](#)
[Report & Map Pricing](#)
[Download Forms](#)
[Important Dates](#)
[Office Directory](#)
[E-mail us Comments](#)

Columbia County Property Appraiser

DB Last Updated: 1/15/2008

Parcel: 03-4S-17-07548-000 HX

2008 Proposed Values

[Tax Record](#)
[Property Card](#)
[Interactive GIS Map](#)
[Print](#)

Owner & Property Info

Owner's Name	ADKINS JOSEPH & SUZANNE		
Site Address	LLEWELLYN		
Mailing Address	657 SE LLEWELLYN AVE LAKE CITY, FL 32055		
Use Desc. (code)	SINGLE FAM (000100)		
Neighborhood	3417.01	Tax District	2
UD Codes	MKTA06	Market Area	06
Total Land Area	0.275 ACRES		
Description	LOT 1 BLOCK 6 OAK HILL ESTATES REPLAT S/D. ORB 667- 444, 761-1328, ADDING NEW HUSBANDS NAME 880-2630,		

<<
Prev

Search Result: 3 of 8

Next
>>

GIS Aerial



Property & Assessment Values

Mkt Land Value	cnt: (1)	\$15,000.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (1)	\$71,117.00
XFOB Value	cnt: (2)	\$350.00
Total Appraised Value		\$86,467.00

Just Value	\$86,467.00
Class Value	\$0.00
Assessed Value	\$50,310.00
Exempt Value	(code: HX) \$25,000.00
Total Taxable Value	\$25,310.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
6/22/1992	761/1328	WD	I	Q		\$43,600.00

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)	1613	2538	\$71,117.00
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	\$250.00	1.000	0 x 0 x 0	(.00)
0258	PATIO	0	\$100.00	1.000	0 x 0 x 0	(.00)



Columbia County
BUILDING DEPARTMENT

RE: Permit # 26852

Inspection Affidavit

I Mac Johnson, licensed as a(n) Contractor* by chapter 489 of the FS

(please print name and circle Lic. Type)
License #: RC0061384

On or about 4-2-08, I did personally inspect the roof
(Date & time)

deck nailing and/or secondary water barrier work at _____,
(circle one) (Job Site Address)

657 Llewellyn Ave Lake City

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.)

[Signature]
Signature

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to and subscribed before me this 2 day of April, 2008

By Mac C. Johnson, Monica H. Malloy
Notary Public, State of Florida

NOTARY PUBLIC, STATE OF FLORIDA
(Print, type or stamp name) Monica H. Malloy
Commission # DD622094
Commission Expires: SEP. 05, 2010
BONDED THRU ATLANTIC BONDING CO., INC.

Personally known ☒ or
Produced Identification _____

Type of identification produced. _____

* General, Building, Residential, or Roofing Contractor certified 489 of the FS.

Or any individual certified under 468 F.S. to make such an inspection. Include photographs of each plane of the roof with the permit
or address # clearly shown marked on the deck for each inspection.

DATE 03/17/2008

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000026852

APPLICANT SUSAN SHORT PHONE 352.472.4943
 ADDRESS POB 367 NEWBERRY FL 32668
 OWNER JOSEPH & SUZANNE ADKINS PHONE 386.755.7997
 ADDRESS 657 LLWELLYN AVENUE LAKE CITY FL 32055
 CONTRACTOR MAC JOHNSON PHONE 352.472.4943
 LOCATION OF PROPERTY EAST BAYA TO LLEWELLYN AVE, TR TO END ON L AND IT'S THE
9TH PROPERTY ON L FROM BAYA DR.
 TYPE DEVELOPMENT REROOF ON SFD ESTIMATED COST OF CONSTRUCTION 4876.00
 HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
 FOUNDATION WALLS ROOF PITCH FLOOR
 LAND USE & ZONING MAX. HEIGHT
 Minimum Set Back Requirements: STREET-FRONT REAR SIDE
 NO. EX.D.U. 1 FLOOD ZONE DEVELOPMENT PERMIT NO.
 PARCEL ID 03-4S-17-07548-000 SUBDIVISION OAKHILL EST. REPLAT
 LOT 1 BLOCK 6 PHASE UNIT TOTAL ACRES
RC0061384
 Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor Susan Short
 EXISTING X-08-081 JLW N
 Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident
 COMMENTS: NOC ON FILE.

Check # or Cash 4975

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 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 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 \$ 25.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
 MISC. FEES \$ 0.00 ZONING CERT. FEE \$ FIRE FEE \$ 0.00 WASTE FEE \$
 FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ CULVERT FEE \$ **TOTAL FEE** 25.00
 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."

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 RECEIVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED TO BE IN ACTIVE PROGRESS WHEN THE PERMIT HAS RECEIVED AN APPROVED INSPECTION WITHIN 180 DAYS.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

