

DATE 08/22/2012

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000030404

APPLICANT LAMAR DUPREE PHONE 754-5678
ADDRESS 1944 E. DUVAL STREET LAKE CITY FL 32055
OWNER MAHENDRA PATEL PHONE 752-2209
ADDRESS 162 NW BIRDIE WAY LAKE CITY FL 32055
CONTRACTOR J.L. DUPREE PHONE 752-4716
LOCATION OF PROPERTY 90 W, R COMMERCE, R FAIRWAY, L CLUBVIEW CIRCLE,
R BIRDIE WAY, 2ND ON RIGHT
TYPE DEVELOPMENT DAMAGE REPAIRS ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING RSF-2 MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00
NO. EX.D.U. 1 FLOOD ZONE A DEVELOPMENT PERMIT NO.

PARCEL ID 27-3S-16-02346-045 SUBDIVISION CLUBVIEW PARK S/D
LOT 6 7 BLOCK 4 PHASE UNIT TOTAL ACRES

CGC060631

Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTNG NA BK TC N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: T.S. DEBBY FLOOD DAMAGED PROPERTY, NOT SUBSTANTIAL DAMAGE,
NO CHARGE FOR PERMIT, RECORDED FORM ON FILE

Check # or Cash NO CHARGE

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

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

BUILDING PERMIT FEE \$ 0.00 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 0.00
INSPECTORS OFFICE L.J. CLERKS OFFICE CH

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 NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

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

T.S. Debby

For Office Use Only Application # 1208-45 Date Received 8-15-12 By UH Permit # 30904

Zoning Official _____ Date 22 Aug 2012 Flood Zone A Land Use RES Low Density Zoning RSF-2

FEMA Map # N/A Elevation N/A MFE N/A River N/A Plans Examiner T.C. Date 8-20-12

Comments Does not meet definition of Substantial Damage

☒ NOC ☒ MEH ☐ Deed or PA ☒ Site Plan ☒ State Road Info ☐ Well letter ☒ 911 Sheet ☐ Parent Parcel # _____

☐ Dev Permit # _____ ☐ In Floodway ☒ Letter of Auth. from Contractor ☐ F W Comp. letter _____

IMPACT FEES: EMS _____ Fire _____ Corr _____ ☒ Sub VF Form 627, 628

Road/Code _____ School _____ = TOTAL (Suspended) ☒ Ellisville Water ☒ App Fee Paid 619-Signat

Septic Permit No. N/A ☒ Air form needs recording Fax 386-752-3070 553-Quel

Name Authorized Person Signing Permit LAMAR DUPREE Phone 386-754-5678

Address 1944 E. DUVAL ST. LAKE CITY, FLA. 32055

Owners Name MAHENDRA PATEL Phone 386-752-2209

911 Address 162 BIRDIE WAY LAKE CITY, FLA. 32055

Contractors Name STANDARD PLUMBING Phone 386-752-4716

Address 1944 E. DUVAL ST. LAKE CITY, FLA. 32055

Fee Simple Owner Name & Address MAHENDRA PATEL 162 BIRDIE WAY, LAKE CITY, FLA. 32055

Bonding Co. Name & Address N/A

Architect/Engineer Name & Address N/A

Mortgage Lenders Name & Address N/A

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress Energy not 50% damaged

Property ID Number 27-35-16-02346-045 Estimated Cost of Construction 72,400.00

Subdivision Name CLUB VIEW PARK Lot 647 Block 4 Unit _____ Phase _____

Driving Directions US 90 WEST TO COMMERCE BLVD. TURN RIGHT TO LAKE CITY COUNTRY CLUB TURN LEFT ON GRANVIEW

CIRCLE (1 ST STREET IN COUNTRY CLUB), GO TO THIRD STREET BIRDIE WAY TURN RIGHT, HOUSE ON RIGHT

(2 STORY) Number of Existing Dwellings on Property _____

Construction of BRICK/STUCCO Total Acreage _____ Lot Size _____

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height _____

Actual Distance of Structure from Property Lines - Front 1st story Side NO Additional Sp. Pt. Side _____ Rear _____

Number of Stories 2 Heated Floor Area 2210 Total Floor Area 3778 Roof Pitch 9/12

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. **CODE: Florida Building Code 2010 and the 2008 National Electrical Code.**

Page 1 of 2 (Both Pages must be submitted together.)

Revised 3-15-12

Spoke to Mr. Lamar
fixed new form 8-21-12

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 such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

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 BUILDING PERMITEE: 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.



Owners Signature

(Owners Must Sign All Applications Before Permit Issuance.)

****OWNER BUILDERS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.**

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.

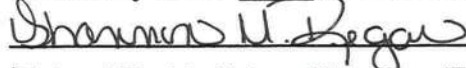


Contractor's Signature (Permitee)

Contractor's License Number CG-C060631
Columbia County
Competency Card Number _____

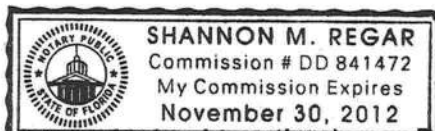
Affirmed under penalty of perjury to by the Contractor and subscribed before me this 15 day of August 2012.

Personally known ☒ or Produced Identification _____



State of Florida Notary Signature (For the Contractor)

SEAL:



AGREEMENT AND RELEASE

The undersigned, MAHENDRA PATEL, (herein "Owner"), whose mailing address is COLUMBIA COUNTY, FLORIDA, hereby executes this Agreement and Release to induce as follows:

Club View Park lot 6 & 7 BLK 4

Tax Parcel No.: 27-35-16-02346-045

Owner has made application to **COLUMBIA COUNTY, FLORIDA** for a building permit for the property affected by Tropical Storm Debby which is located in a Special Flood Hazard Area according to the 2009 FEMA Flood Insurance Maps and does not meet the requirements of Substantial Damage as defined by the 2010 Florida Building Code and Columbia County Land Development Regulations for the rebuild, repair or remodel of an existing dwelling.

Owner is aware and has been advised that the property is located in a Special Flood Hazard Area as designated by the 2009 FEMA Flood Insurance Rate Maps, the property has flooded in the past and may be subject to flooding in the future. Owner releases **COLUMBIA COUNTY, FLORIDA** and **COLUMBIA COUNTY** shall not be liable to Owner or any other parties as a result of flooding conditions which have or may occur on Owner's property or damage to improvements on Owner's property. This is with the understanding that **COLUMBIA COUNTY** takes no unlawful actions which substantially contribute to flooding conditions on Owner's property.

Owner agrees that if Owner in the future transfers any interest in the property to any other third party, Owner will provide said future transferee with a copy of this Agreement and advise said future transferee of the fact that Owner's property has flooded in the past and the circumstances surrounding the flooding; and further that **COLUMBIA COUNTY** is not liable to Owner or any future transferee for any damages suffered as a result of these flood conditions.

Owner and any future transferee of the property will at all times comply with the Columbia County Comprehensive Plan and Land Development Regulations regarding any development upon the property.

Owner acknowledges this Agreement and Release will be recorded among the public records of Columbia County, Florida.

Dated this 15 day of AUGUST, 2012.

Signed, sealed and delivered in the presence of:

Scott L Collins
Witness

SCOTT L COLLINS
Print or type name

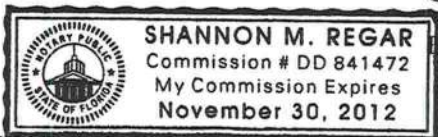
Lamar Dupree
Witness

LAMAR DUPREE
Print or type name

Mahendra Patel
Owner

J. M. Patel
Co-Owner

COLUMBIA COUNTY, FLORIDA



by: N/A
Name: N/A
Title: N/A

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

The foregoing instrument was acknowledged before me this 15 day of August, 2012 by MAHENDRA PATEL who is/are personally known to me or who has/have produced as identification.

Shannon M. Regar
Notary Public, State of Florida



My Commission Expires:
11/30/2012

8/21/12

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1208-45

CONTRACTOR

PHONE

386-8674787

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County 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 permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name _____	Signature _____
	License #: _____	Phone #: _____
MECHANICAL/ A/C _____	Print Name _____	Signature _____
	License #: _____	Phone #: _____
PLUMBING/ GAS CFC	Print Name <i>Master C Faulkner</i>	Signature <i>[Signature]</i>
	License #: <i>1426421</i>	Phone #: <i>386-755-1568</i>
ROOFING	Print Name <i>MAC JOHNSON</i>	Signature <i>[Signature]</i>
	License #: <i>RG0031684 RC0061384</i>	Phone #: <i>352-472-4943</i>
SHEET METAL	Print Name _____	Signature _____
	License #: _____	Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____	Signature _____
	License #: _____	Phone #: _____
SOLAR	Print Name _____	Signature _____
	License #: _____	Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

F. S. 440.103 Building permits; Identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Contractor Form: Subcontractor form: 6/09

386-758-2160

PH 7-5-4-5431

To: Mr. Lamar

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1208-45

CONTRACTOR STANDARD PLUMBINGPHONE 386-752-4716

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ELECTRICAL 76	Print Name <u>Mark Matthews</u> License #: <u>ER-0014352</u>	Signature <u>Mark Matthews</u> Phone #: <u>386-344-2029</u>
MECHANICAL/A/C	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/GAS 795	Print Name <u>STANDARD PLUMBING</u> License #: <u>CFC-1487845</u> <u>N/A</u>	Signature <u>Mark Matthews</u> <u>Per Mr. Lamar</u> Phone #: <u>386-752-4716</u> <u>8/21/12</u>
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: <u>See Attached Sheet</u>
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION	000628	JACKSON INSULATION	Bob O Jordan
STUCCO			
DRYWALL	000627	JACKSON DRYWALL	Bob O Jordan
PLASTER			
CABINET INSTALLER			
PAINTING	001040	JOHN DAVIS - PAINTING	JD
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR	619	LAKE CITY GLASS / Carl Bullard	
METAL BLDG ERECTOR			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Contractor Forms: Subcontractor form: 6/09

G. Fax #: 758-2160

Spoke to office 8-16-12

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR STANDARD PLUMBING PHONE 386-752-4716
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

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ELECTRICAL	Print Name <u>Mark Matthews</u> License #: <u>ER-0014352</u>	Signature <u>[Signature]</u> Phone #: <u>386-344-2029</u>
MECHANICAL/ A/C	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS	Print Name <u>STANDARD PLUMBING</u> License #: <u>CFC-1407045</u>	Signature <u>[Signature]</u> Phone #: <u>386-752-4716</u>
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION	<u>000628</u>	<u>JACKSON INSULATION</u>	<u>[Signature]</u>
STUCCO			
DRYWALL	<u>000627</u>	<u>JACKSON DRYWALL</u>	<u>[Signature]</u>
PLASTER			
CABINET INSTALLER			
PAINTING	<u>001040</u>	<u>JOHN DAVIS-PAINTING</u>	<u>[Signature]</u>
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR	<u>000619</u>	<u>LAKE CITY GLASS</u>	<u>[Signature]</u>
METAL BLDG ERECTOR			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

8/21/12

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APPLICATION NUMBER _____

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PHONE _____

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Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ok
553

ELECTRICAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C _____	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS <i>cfc</i>	Print Name <i>Master C Fowler</i> License #: <i>1426421</i>	Signature <i>[Signature]</i> Phone #: <i>386 755-1568</i>
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Columbia County Property Appraiser

CAMA updated: 8/2/2012

2011 Tax Year

Parcel: 27-3S-16-02346-045

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

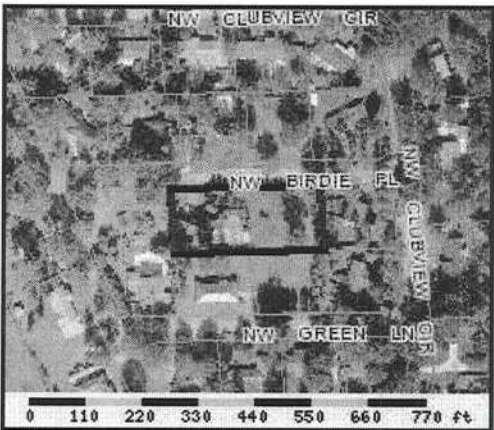
Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	PATEL MAHENDRA & SHAKU M CO-TR		
Mailing Address	OF SHAKU M PATEL FAMILY TRUST 162 NW BIRDIE PL LAKE CITY, FL 32055		
Site Address	162 NW BIRDIE PL		
Use Desc. (code)	SINGLE FAM (000100)		
Tax District	2 (County)	Neighborhood	27316
Land Area	0.000 ACRES	Market Area	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOTS 6 & 7 BLK 4 CLUB VIEW PARK S/D. SWD 1199-217, & DRAINAGE EASEMENT ORB 1230- 664			



Property & Assessment Values

2011 Certified Values		
Mkt Land Value	cnt: (0)	\$45,489.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (1)	\$165,595.00
XFOB Value	cnt: (6)	\$17,408.00
Total Appraised Value		\$228,492.00
Just Value		\$228,492.00
Class Value		\$0.00
Assessed Value		\$164,095.00
Exempt Value	(code: HX)	\$50,000.00
Total Taxable Value		Cnty: \$114,095 Other: \$114,095 Schl: \$139,095

2012 Working Values

NOTE:
2012 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
7/16/2010	1199/217	WD	V	U	11	\$100.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1985	COMMON BRK (19)	3778	4414	\$162,584.00
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	1993	\$1,750.00	0000001.000	0 x 0 x 0	(000.00)
0190	FPLC PF	1985	\$2,400.00	0000002.000	0 x 0 x 0	(000.00)
0280	POOL R/CON	1993	\$6,758.00	0000512.000	32 x 16 x 0	(000.00)
0220	JACUZZI	1993	\$1,500.00	0000001.000	0 x 0 x 0	(000.00)
0282	POOL ENCL	1993	\$4,500.00	0001000.000	0 x 0 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000100	SFR (MKT)	2 LT - (0000000.000AC)	1.00/1.00/0.90/1.00	\$18,195.50	\$36,391.00

Columbia County Property Appraiser

CAMA updated: 8/2/2012

DISCLAIMER

This information was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of

NOTICE OF COMMENCEMENT

PERMIT# _____

STATE OF: FLORIDA

COUNTY OF: COLUMBIA

CITY OF: LAKE CITY

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.

DESCRIPTION OF PROPERTY

SECTION: 27 TOWNSHIP: 3S RANGE: 16 TAX PARCEL #: 27-3S-16-02346-045

LOT: 6 & 7 BLOCK: 4 SUBDIVISION: Club View Park

PLATBOOK #: 3 Page 102 MAP PAGE #: N/A

STREET ADDRESS: 162 N.W. Birdie Way, Lake City, FL 32055

GENERAL DESCRIPTION OF IMPROVEMENT

TO CONSTRUCT: Flood Damage – Electrical, Plumbing, A/C, Drywall, Interior Trim / Doors, Flooring, Painting, Cabinets

OWNER INFORMATION

NAME: Mahendra Patel PHONE NUMBER: 386-752-2209

ADDRESS: 162 N.W. Birdie Way, Lake City

STATE: Florida ZIP CODE: 32055

INTEREST IN THE PROPERTY: N/A

FEE SIMPLE TITLEHOLDER NAME (OTHER THAN OWNER):

FEE SIMPLE TITLEHOLDER ADDRESS: N/A

CONTRACTOR NAME: Joseph L. DuPree, Jr PHONE NUMBER: 386-754-5678

COMPANY NAME: Standard Plumbing & Supplies, Inc FAX NUMBER: 386-752-3070

ADDRESS: P.O. Box 2187 CITY: Lake City

STATE: FLORIDA ZIP CODE: 32056

BONDING COMPANY: N/A

PHONE NUMBER: _____

ADDRESS: _____ FAX NUMBER: _____

CITY: _____ STATE: _____ ZIP CODE: _____

LENDER NAME: N/A

PHONE NUMBER: _____

ADDRESS: _____ FAX 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), Florida Statute:

NAME: N/A ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

In addition to himself, the owner designates N/A of _____

To receive a copy of the Lienor's notice as provided in Section 713.13(1)(b) Florida Statutes.

Expiration date of Notice of Commencement (the expiration date is one (1) year from the date of recording unless a different date is specified): N/A

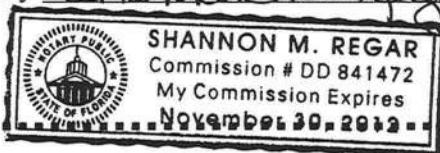
SIGNATURE OF OWNER: _____

Sworn to and subscribed before me this 15 day of August, 2012

Known personally/I.D. Shown

Notary: Shannon M. Regar

My commission expires: 11/30/2012



PRODUCT APPROVAL SPECIFICATION SHEET


As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products.

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
1. EXTERIOR DOORS			
A. SWINGING	HUTTING	STEEL PREHUNG-DOOR UNITS	FL-8838.1
B. SLIDING			
C. SECTIONAL			
D. ROLL UP			
E. AUTOMATIC			
F. OTHER			
2. WINDOWS			
A. SINGLE HUNG	BETTER BUILT	SH, INSULATED, 1/1, ALUMN MI 740	FL-11827.2
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. DOUBLE HUNG			
E. FIXED			
F. AWNING			
G. PASS THROUGH			
H. PROJECTED			
I. MULLION			
J. WIND BREAKER			
K. DUAL ACTION			
L. OTHER			
3. PANEL WALL			
A. SIDING			
B. SOFFITS			
C. EIFS			
D. STOREFRONTS			
E. CURTAIN WALLS			
F. WALL LOUVER			
G. GLASS BLOCK			
H. MEMBRANE			
I. GREENHOUSE			
J. OTHER			
4. ROOFING PRODUCTS			
A. ASPHALT SHINGLES	ELK GAF	30 YEAR- FIBERGLASS SHINGLE	FL 586-R-2
B. UNDERLAYMENTS		50lb FELT	FL1814-R-1
C. ROOFING FASTENERS			
D. NON-STRUCTURAL METAL ROOFING			
E. WOOD SHINGLES AND SHAKES			
F. ROOFING TILES			
G. ROOFING INSULATION			
H. WATERPROOFING			
I. BUILT UP ROOFING ROOF SYSTEMS			
J. MODIFIED BITUMEN			
K. SINGLE PLY ROOF SYSTEMS			
L. ROOFING SLATE			
M. CEMENTS-ADHESIVES COATINGS			

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
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N. LIQUID APPLIED ROOF SYSTEMS			
O. ROOF TILE ADHESIVE			
P. SPRAY APPLIED POLYURETHANE ROOF			
Q. OTHER			
5. SHUTTERS			
A. ACCORDION			
B. BAHAMA			
C. STORM PANELS			
D. COLONIAL			
E. ROLL-UP			
F. EQUIPMENT			
G. OTHERS			
6. SKYLIGHTS			
A. SKYLIGHT			
B. OTHER			
7. STRUCTURAL COMPONENTS			
A. WOOD CONNECTORS/ ANCHORS			
B. TRUSS PLATES			
C. ENGINEERED LUMBER			
D. RAILING			
E. COOLERS-FREEZERS			
F. CONCRETE ADMIXTURES			
G. MATERIAL			
H. INSULATION FORMS			
I. PLASTICS			
J. DECK-ROOF			
K. WALL			
L. SHEDS			
M. OTHER			
8. NEW EXTERIOR ENVELOPE PRODUCTS			
A.			
B.			

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) the performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements. Further, I understand these products may have to be removed if approval cannot be demonstrated during inspection.


APPLICANT SIGNATURE

8-15-2012
DATE

