DATE COUNTY This Permit Expires One Y	
APPLICANT AARON SIMQUE	PHONE <u>755.0841</u>
ADDRESS RT.9, BOX 785-33	LAKE CITY FL 32024
OWNER AARON SIMQUE	PHONE <u>755.0841</u>
ADDRESS 157 STAFFORD COURT	LAKE CITY FL 32024
CONTRACTOR AARON SIMQUE HOMES, INC.	PHONE 755.0841
	L, GO TO CALLAWAY S/D, PHASE
	LOT R, @ END OF CUL-DE-SAC.
TYPE DEVELOPMENT SFD & UTILITY ES	STIMATED COST OF CONSTRUCTION 94650.00
HEATED FLOOR AREA 1893.00 TOTAL AR	REA2817.00
FOUNDATION CONC WALLS FRAMED	ROOF PITCH 8'12 FLOOR CONC
LAND USE & ZONING RSF-2	MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 25.00	0 REAR 15.00 SIDE 10.00
NO. EX.D.U. FLOOD ZONE XPP	
NO. EA.D.O. PLOOD ZOINE APP	DEVELOPMENT PERMIT NO.
PARCEL ID 15-4S-16-03023-069 SUBDIVISIO	ON CALLAWAY
LOT 69 BLOCK PHASE 3 UNIT	TOTAL ACRES 50
000000262 RB29003130	
Culvert Permit No. Culvert Waiver Contractor's License Nur 18"X32'MITERED 04-0388-N BLK	mber Applicant/Owner/Contractor  JDK N
	ing checked by Approved for Issuance New Resident
COMMENTS: 1 FOOT ABOVE ROAD	ing checked by hippinoved to localized
- NOC ON SIE	
	Check # or Cash 1736
FOR BUILDING & ZONII	NG DEPARTMENT ONLY
Temporary Power Foundation	Monolithic (footer/Slab)
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 a date/app. by	bove slab and below wood floor
Plantained annuals in	date/app. by
date/app. by  Heat & Air Duct	Peri. beam (Lintel)  date/app. by  date/app. by
Permanent power C.O. Final	Culvert
	date/app. by date/app. by
M/H tie downs, blocking, electricity and plumbing  date/app	Pool
Reconnection Pump pole	date/app. by  Utility Pole
date/app. by  M/H Pole  Travel Trailer	date/app. by
	Re-roof date/app. by
BUILDING PERMIT FEE \$ 475.00 CERTIFICATION FE	E.\$ 14.09 SURCHARGE FFE \$ 14.09
MISC. FEES \$ .00 ZONING CERT. FEE \$ 50.00	
FLOOD ZONE DEVELOPMENT FEED CULVERT F	TEE \$ 25.00 TOTAL FEE 578.18
INSPECTORS OFFICE	CLERKS OFFICE
NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS CO	E MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS
THIS CO	JOINT 1. AIND THEKE 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.

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

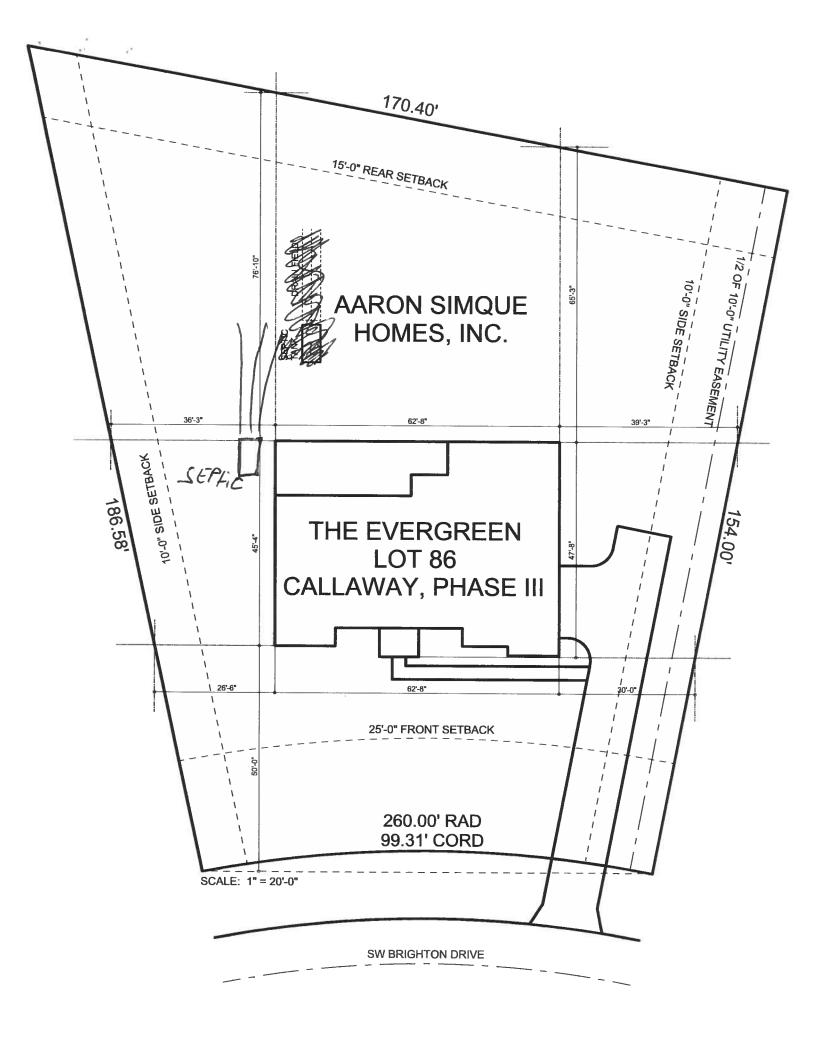
# Building Permit Application

Personally Known \_\_\_\_OR Produced Identification

Dat 5 - 4 - 0 9	Application No. O 403 97
Applicants Name & Address Aoron Singre R+ 9 Box 785-32 CARECCIA	<u> </u>
Owners Name & Address	Phone
	Stafford Court 137024 Phone
Contractors Name & Address	Phone
Legal Description of Property <u>Collaway Col</u>	69 PHOSE 3 15-45-16-
Location of Property IN Collanoy Subdi	VISION Of Brand Ford HWY
Distance From Property Lines (Set Backs) Front <u>55</u> Flood Zone Certification Date	Number of Existing Dwellings on Property O
Bonding Company Name & Address  Architect/Engineer Name & Address  Mortgage Lenders Name & Address  First FEDER	AU
commenced prior to the issuance of a permit and that all work w construction in this jurisdiction.	l installations as indicated. I certify that no work or installation has ill be performed to meet the standards of all laws regulating bing information is accurate and all work will be done in compliance
RECORDING YOUR NOTICE OF COMMENCEN	EMENTS TO YOUR PROPERTY. SULT WITH YOUR LENDER OR ATTORNEY BEFORE
Owner or Agent (including contractor)	Contractor  RB 27002136  Contractor License Number
STATE OF FLORIDA COUNTY OF COLUMBIA Sworn to (or affirmed) and subscribed before me this day of by	STATE OF FLORIDA COUNTY OF COLUMBIA Sworn to (or affirmed) and subscribed before me this day of by

# 260

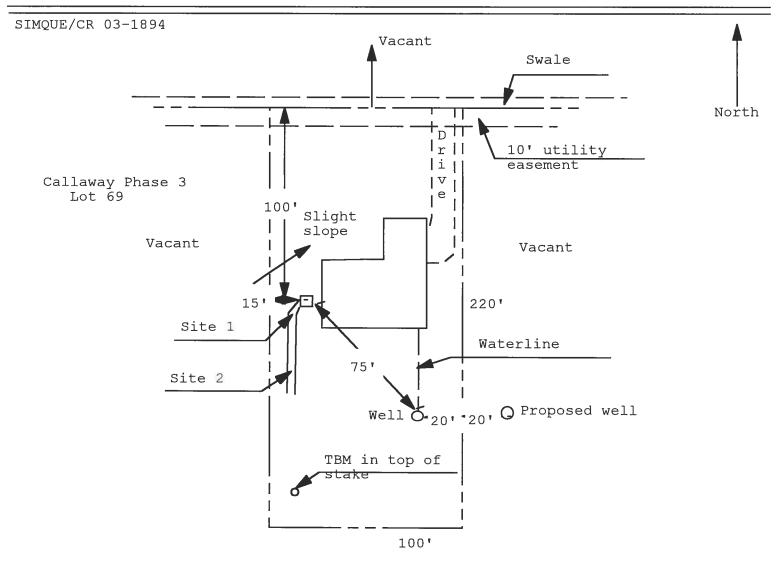
Personally Known \_\_\_\_OR Produced Identification



CK# 1736

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan Permit Application Number: 04-0388N

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Vacant

	1 inch = 50 feet
Site Plan Submitted By Date Plan Approved Date 2/29	3/29/04
By Jaul Hays my	ССРНИ
Notes: 4-6-04	

## **Columbia County Building Department Culvert Permit**

### Culvert Permit No. 000000262

DATE C	04/07/2004	PARCEL ID #	15-4S-16-03023-369	
APPLICAN	T AARON SIMQUE		PHONE	755.0841
ADDRESS	RT. 9, BOX 785-33		LAKE CITY	FL 32024
OWNER	AARON SIMQUE	. ,	PHONE	755.0841
ADDRESS	157 SW STAFFORD COU	JRT	LAKE CITY	FL 32024
CONTRAC	TOR AARON SIMQUE HOM	IES, INC.	PHONE	755.0841
LOCATION	OF PROPERTY C-247-	S TO CALLAHAN I	ROAD., L, GO TO CALLAW	AY S/D., PHASE 3
TAKE STAFF	ORD CRT., LAST LOT ON RIG	HT @ THE END O	F THE CUL-DE-SAC.	
SUBDIVISI	ON/LOT/BLOCK/PHASE	UNITCALLAWA	Y	69 3
SIGNATUR	E A			
	INSTALLATION R	> EQUIREMENT	<u>rs</u>	
X		ends will be mit		of 32 feet, leaving 24 feet of slope and poured with a 4 incl
	<ul><li>a) a majority of the</li><li>b) the driveway to l</li><li>Turnouts shall be</li></ul>	current and exist be served will be concrete or paved driveway, which	hever is greater. The wid	re paved, or; oncrete. wide or the width of the
	Culvert installation sh	nall conform to th	ne approved site plan sta	ndards.
	Department of Transp	oortation Permit i	installation approved sta	ndards.
	Other			

ALL PROPER SAFETY REQUIREMENTS SHOULD BE FOLLOWED DURING THE INSTALATION OF THE CULVERT.

135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160

Amount Paid 25.00



1/ 21707

THIS INSTRUMENT WAS PREPARED BY:

TERRY McDAVID 04-44 POST OFFICE BOX 1328 LAKE CITY, FL 32056-1328

Inst: 2004008677 Date: 04,	/19/2004 Time:1	0:35	
DC, P. DeWitt	Cason,Columbia	County	B: 1012

PERMIT NO.

TAX FOLIO NO.: Part of R03023-099

P:2249

### NOTICE OF COMMENCEMENT

STATE OF FLORIDA COUNTY OF COLUMBIA

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: 1.
- Lot 69, CALLAWAY PHASE THREE, a subdivision according to the plat thereof recorded in Plat Book 7, Pages 145-146 of the public records of Columbia County, Florida.
  - General description of improvement: Construction of Dwelling
  - Owner information: Name and address: AARON SIMQUE HOMES, INC., Route 9, Box 785-33, Lake City, FL 32024
    - Interest in property: Fee Simple
    - Name and address of fee simple title holder (if other than Owner): None
  - Contractor: AARON SIMQUE HOMES, INC. Route 9, Box 785-33, Lake City, FL 32024
  - 5. Surety n/a
    - Name and address:
    - Amount of bond: b.
  - Lender: PEOPLES STATE BANK 6. 350 SW Main Blvd., Lake City, FL 32025
- Persons within the State of Florida designated by Owner upon whom or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes: None
- In addition to himself, Owner designates Robert Woodard at Peoples State Bank, 350 SW Main Blvd., Lake City, FL 32025 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 1 year from the date of recording unless a different date is specified). March 3, 2005.

By: AARON SIMQUE, President

The foregoing instrument was acknowledged before me this 31st day of March, 2004, by AARON SIMQUE, as President of AARON SIMQUE HOMES, INC., who is personally known to me and who did not take an oath.

CLERK

FLORIDA

STATE OF FLORIDA, COUNTY OF COLUMBIA I HEREBY CERTIFY, that the above and foregoing

is a true copy of the original filed in this office.
P. DeWITT CASON, CLERK OF COURTS

Notary Public My commission expires:

AARON SIMOVE HOMES,

