

DATE 05/04/2005

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000023106

APPLICANT ROBERT MCGRAW JR PHONE 755-4086
ADDRESS 339 SW EMERALD ST LAKE CITY FL 32024
OWNER ROBERT MCGRAW PHONE 755-4086
ADDRESS 339 SW EMERALD ST LAKE CITY FL 32024
CONTRACTOR OWNER PHONE _____
LOCATION OF PROPERTY 247 S, TURN INTO EMERALD FOREST ENTRANCE THEN THE
7TH HOUSE ON THE LEFT

TYPE DEVELOPMENT DETACHED GARAGE ESTIMATED COST OF CONSTRUCTION 6000.00
HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT 18.00 STORIES 1
FOUNDATION CONCRETE WALLS FRAMED ROOF PITCH 6/12 FLOOR SLAB
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 X DEVELOPMENT PERMIT NO. _____

PARCEL ID 11-4S-16-02919-127 SUBDIVISION EMERALD FOREST
LOT 27 BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES .50

Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor *REM McGraw*
EXISTNG _____ X05-0084 BK N
Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: NOC ON FILE AND DESCLOSURE STATEMENT

Check # or Cash 3887

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 \$ 30.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ _____ WASTE FEE \$ _____
FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ _____ TOTAL FEE 80.00

INSPECTORS OFFICE *J. L. L.* 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."

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.

Columbia County Building Permit Application

Revised 9-23

For Office Use Only Application # 0503-88 Date Received 3/29/05 By LH Permit # 23106
Application Approved by - Zoning Official BZK Date 07.04.05 Plans Examiner OK JTH Date 5-4-05
Flood Zone X Development Permit N/A Zoning RSF-2 Land Use Plan Map Category Res Low
Comments need - AOC - EH Den.

Applicants Name Robert E. McGraw Jr Phone 386-755-4086
Address 339 SW, Emerald St Lake City FLA 32024
Owners Name SAME Phone WK-752-7412 EXT 111
911 Address SAME
Contractors Name Owner Phone _____
Address _____
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 Ener

Property ID Number 11-45-16-02919-127 Estimated Cost of Construction \$6000,00
Subdivision Name EMERALD FOREST Lot 27 Block _____ Unit _____ Phase 2
Driving Directions South on 247 TO EMERALD FOREST ENTRANCE
7th house on LEFT

Type of Construction GARAGE (Detached) Number of Existing Dwellings on Property 1
Total Acreage 1/2 Lot Size 15 Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Dr
Actual Distance of Structure from Property Lines - Front 80' Side 10' Side 67' Rear 90'
Total Building Height 18' MAX Number of Stories 1 Heated Floor Area N/A Roof Pitch 6-12

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.

Robert E. McGraw Jr
Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me
this _____ day of _____ 20____.
Personally known _____ or Produced Identification _____

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

Notary Signature _____

NOTICE OF COMMENCEMENT FORM
COLUMBIA COUNTY, FLORIDA

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.

Tax Parcel ID Number 11-45-16-02919-127

1. Description of property: (legal description of the property and street address or 911 address)

* 339 SW, EMERALD ST.
LAKE CITY FLA 32024

Lot 27 EMERALD Forest Phase 2 Book 6 Page 77

2. General description of improvement: GARAGE

3. Owner Name & Address ROBERT E MCGRAW 339 SW EMERALD ST
LAKE CITY, FLA 32024 Interest In Property OWNER

4. Name & Address of Fee Simple Owner (if other than owner):

5. Contractor Name Owner Phone Number
Address

6. Surety Holders Name Inst: 2005007170 Date: 03/29/2005 Time: 13:32
SAH DC, P. DeWitt Cason, Columbia County B: 1041 P: 2355
Address
Amount of Bond

7. Lender Name Phone Number
Address

8. Persons within the State of Florida designated by the Owner upon whom notices or other documents may be served as provided by section 718.13 (1)(a) 7; Florida Statutes:

Name Phone Number
Address

9. In addition to himself/herself the owner designates of
to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) -
(a) 7. Phone Number of the designee

10. Expiration date of the Notice of Commencement (the expiration date is 1 (one) year from the date of recording,
(Unless a different date is specified)

NOTICE AS PER CHAPTER 713, Florida Statutes:

The owner must sign the notice of commencement and no one else may be permitted to sign in his/her stead.

Robert McGraw
Signature of Owner
Robert McGraw

Sworn to (or affirmed) and subscribed before
day of 3-29, 2005

NOTARY STAMP/SEAL



Laurie Hodson
Signature of Notary

DISCLOSURE STATEMENT

Make Copy

FOR OWNER/BUILDER WHEN ACTING AS THEIR OWN CONTRACTOR AND CLAIMING EXEMPTION OF CONTRACTOR LICENSING REQUIREMENTS IN ACCORDANCE WITH FLORIDA STATUTES, ss. 489.103(7).

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$25,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. You may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

TYPE OF CONSTRUCTION

☐ Single Family Dwelling

☐ Farm Outbuilding

☒ New Construction

☐ Two-Family Residence

☐ Other _____

☐ Addition, Alteration, Modification or other Improvement

NEW CONSTRUCTION OR IMPROVEMENT

I Robert E. McGraw Jr., have been advised of the above disclosure statement for exemption from contractor licensing as an owner/builder. I agree to comply with all requirements provided for in Florida Statutes ss.489.103(7) allowing this exception for the construction permitted by Columbia County Building Permit Number _____

R. E. McGraw Jr.
Signature

4-8-05
Date

FOR BUILDING USE ONLY

I hereby certify that the above listed owner/builder has been notified of the disclosure statement in Florida Statutes ss 489.103(7).

Date 4-8-05

Building Official/Representative

Joe Salgado

PLACE.
PLAT.
IES.
LOCATED.

@ CAM112M01S CamaUSA Appraisal SystemColumbia County
3/29/2005 13:04 Legal Description Maintenance14875 Land 001 *
Year T PropertySelAG 000
2005, R 11-4S-16-02919-12767424 Bldg 001
339 EMERALD ST SW2400 Xfea 002
HX MCGRAW ROBERT E JR & CAROLE S84699 TOTALB*

1	LOT 27, EMERALD FOREST, PHASE 2, S/D, ORB 765-1296,, 765-1297,,	2
3	768-2271,, WD 840-290,, WD 1037-715.,	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 2/16/2005 KYLIE
F1=Task F3=Exit F4=Prompt F10=GoTo PgUp/PgDn F24=More

TABLE 2308.3A
HEADER SPANS¹ FOR EXTERIOR BEARING WALLS
(MAXIMUM HEADER SPANS FOR DOUGLAS FIR-LARCH,
HEM-FIR, SOUTHERN PINE, AND SPRUCE-PINE-FIR² AND
REQUIRED NUMBER OF JACK STUDS)

		Building Width ³ (ft)					
		20		28		36	
Headers Supporting:	Size	Span	NJ	Span	NJ	Span	NJ
Roof, Ceiling ⁴	2-2x4	3-6	1	3-2	1	2-10	1
	2-2x6	5-5	1	4-8	1	4-2	1
	2-2x8	6-10	1	5-11	2	5-4	2
	2-2x10	8-5	2	7-3	2	6-6	2
	2-2x12	9-9	2	8-5	2	7-6	2
	3-2x8	8-4	1	7-5	1	6-8	1
	3-2x10	10-6	1	9-1	2	8-2	2
	3-2x12	12-2	2	10-7	2	9-5	2
	4-2x8	9-2	1	8-4	1	7-6	1
	4-2x10	11-8	1	10-6	1	9-5	2
	4-2x12	14-1	1	12-2	2	10-11	2

Notes:

- NJ - Number of jack studs required to support each end. Where the number of required jack studs equals 1, the header may be supported by a framing anchor attached to the full-height wall stud.
1. Spans are given in feet and inches (ft-in).
 2. Tabulated values assume #2 Grade lumber.
 3. Building width is measured perpendicular to the ridge. For widths between those shown, spans may be interpolated.
 4. Maximum loads: Roof dead load of 20 psf and live load of 20 psf, floor dead load of 10 psf and live load of 40 psf, and wall dead load of 11 psf.

TABLE 2308.3B
HEADER SPANS¹ FOR EXTERIOR BEARING WALLS
(MAXIMUM HEADER SPANS FOR DOUGLAS FIR-LARCH,
HEM-FIR, SOUTHERN PINE, AND SPRUCE-PINE-FIR²
AND REQUIRED NUMBER OF JACK STUDS)

		Building Width ³ (ft)					
		20		28		36	
Headers Supporting:	Size	Span	NJ	Span	NJ	Span	NJ
Roof, Ceiling & 1 Center-bearing Floor ⁴	2-2x4	3-1	1	2-9	1	2-5	1
	2-2x6	4-6	1	4-0	1	3-7	2
	2-2x8	5-9	2	5-0	2	4-6	2
	2-2x10	7-0	2	6-2	2	5-6	2
	2-2x12	8-1	2	7-1	2	6-5	2
	3-2x8	7-2	1	6-3	2	5-8	2
	3-2x10	8-9	2	7-8	2	6-11	2
	3-2x12	10-2	2	8-11	2	8-0	2
	4-2x8	8-1	1	7-3	1	6-7	1
	4-2x10	10-1	1	8-10	2	8-0	2
	4-2x12	11-9	2	10-3	2	9-3	2
Roof, Ceiling & 1 Clear Span Floor ⁴	2-2x4	2-8	1	2-4	1	2-1	1
	2-2x6	3-11	1	3-5	2	3-0	2
	2-2x8	5-0	2	4-4	2	3-10	2
	2-2x10	6-1	2	5-3	2	4-8	2
	2-2x12	7-1	2	6-1	3	5-5	3
	3-2x8	6-3	2	5-5	2	4-10	2
	3-2x10	7-7	2	6-7	2	5-11	2
	3-2x12	8-10	2	7-8	2	6-10	2
	4-2x8	7-2	1	6-3	2	5-7	2
	4-2x10	8-9	2	7-7	2	6-10	2
	4-2x12	10-2	2	8-10	2	7-11	2

Notes:

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Notice of Treatment AD

Applicator: Florida Pest Control & Chemical Co. (www.flapest.com)

Address: BAY AREA
 City L.C. Phone 7521703

Site Location: Subdivision Emerald Forest T
 Lot # Block # Permit # 23106
 Address 399 SW Emerald Way

Product used	Active Ingredient	% Concentration
<input type="checkbox"/> Dursban TC	Chlorpyrifos	0.5%
<input checked="" type="checkbox"/> Terminor	Fipronil	0.06%
<input type="checkbox"/> Bora-Care	Disodium Octaborate Tetrahydrate	23.0%

Type treatment: ☒ Soil ☐ Wood

Area Treated	Square feet	Linear feet	Gallons Applied
<u>Detached Garage</u>	<u>572</u>	<u>96</u>	<u>96</u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>

As per Florida Building Code 104.2.6 – If soil chemical barrier method for termite prevention is used, final exterior treatment shall be completed prior to final building approval.

If this notice is for the final exterior treatment, initial this line .

Date 5/6/05 Time 1500
 Print Technician's Name Zaimy B34

Remarks: Exterior not complete.