

Columbia County Swimming Pool/Spa Permit Application

For Office Use Only		Application # <u>44418</u>	Date Received <u>1/29</u>	By <u>MG</u>	Permit # <u>39235</u>
Zoning Official <u>LW/LA</u>	Date <u>1-29-20</u>	Flood Zone <u>X</u>	Land Use <u>Ag</u>	Zoning <u>PRR</u>	
FEMA Map # _____	Elevation _____	MFE _____	River _____	Plans Examiner <u>1.c</u>	Date <u>2-4-20</u>
Comments					
<input checked="" type="checkbox"/> NOC <input checked="" type="checkbox"/> EH <input checked="" type="checkbox"/> Deed or PA <input checked="" type="checkbox"/> Site Plan <input type="checkbox"/> 911 Sheet (If NO Address Exists) <input type="checkbox"/> Owner Builder Disclosure Statement <input type="checkbox"/> Dev Permit # _____ <input type="checkbox"/> In Floodway <input checked="" type="checkbox"/> Letter of Auth. from Contractor <input type="checkbox"/> F W Comp. letter <input type="checkbox"/> Land Owner Affidavit <input type="checkbox"/> Ellisville Water <input checked="" type="checkbox"/> App Fee Paid <input checked="" type="checkbox"/> Sub VF Form					
Notes: _____					

Septic Permit No. 19-0826 Or City Water System ☐ Fax 855-787-6289

Applicant (Who will sign/pickup the permit) Susan L. Frazee Phone (386) 292-6722

Address 346 NW Ivy Glen, Lake City, FL 32055

Owners Name Mark Proter, Gibraltar Contracting Inc Phone (352) 283-2002

911 Address 20267 NW 248th Way, High Springs, FL 32643

Contractors Name Susan L. Frazee Phone (386) 365-5299

Address 346 NW Ivy Glen, Lake City, FL 32055

Contractor Email aquaticartpools@bellsouth.net ***Include to get updates on this job.

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address Riddle Consulting Engineers, 1720 SE CR48

Mortgage Lenders Name & Address Bellevue, FL 34420

Circle the correct power company ☐ FL Power & Light ☒ Clay Elec. ☐ Suwannee Valley Elec. ☐ Duke Energy

Property ID Number 18-5S-17-09280-127 Cost of Construction \$49,500

Subdivision Name Oaks of Lake City Lot 27 Block - Unit - Phase 1

Driving Directions Main Blvd to Hwy 47S - turn left at SW Ring Ct.,
CR 242 (1.1 mi) Rt on SW Tustenuggee Ave. (5.0 mi) Rt. on Mandiba

Residential ☒ OR Commercial ☐

Construction of in ground swimming pool ADA Compliant ☒ Total Acreage 1.03

→ Actual Distance of Pool from Property Lines - Front 135' Side 50' Side 70' Rear 145'

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 2014 and the 2011 National Electrical Code.

Columbia County Building Permit Application

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 a permit has been issued.

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 CONTRACTOR AND AGENT: 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.

Mark Bauer
Print Owners Name


Owners Signature

****Property owners must sign here
before any permit will be issued.**

****If this is an Owner Builder Permit Application then, ONLY the owner can sign the building permit when it is issued.**

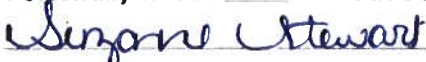
CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.


Contractor's Signature

Contractor's License Number CPC1457969
Columbia County
Competency Card Number 905 ✓

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 24 day of Jan 2020

Personally known ☒ or Produced Identification ☐


State of Florida Notary Signature (For the Contractor)

SEAL:



SUZANNE STEWART
Commission # GG 932386
Expires November 17, 2023
Bonded Thru Budget Notary Services

Detail by Entity Name

Florida Limited Liability Company
GIBALTAR CONTRACTING, LLC

Filing Information

Document Number L13000113885
FEI/EIN Number 46-3603997
Date Filed 08/13/2013
State FL
Status ACTIVE

Principal Address

20267 NW 248TH WAY
HIGH SPRINGS, FL 32643

Mailing Address

20267 NW 248TH WAY
HIGH SPRINGS, FL 32643

Registered Agent Name & Address

BAUER, MARK D
20267 NW 248TH WAY
HIGH SPRINGS, FL 32643

Authorized Person(s) Detail

Name & Address

Title MGR

BAUER, MARK D
20267 NW 248TH WAY
HIGH SPRINGS, FL 32643

Annual Reports

Report Year	Filed Date
2017	04/26/2017
2018	01/16/2018
2019	05/01/2019

Document Images

05/01/2019 -- ANNUAL REPORT	View image in PDF format
01/16/2018 -- ANNUAL REPORT	View image in PDF format
04/26/2017 -- ANNUAL REPORT	View image in PDF format
01/23/2016 -- ANNUAL REPORT	View image in PDF format
04/21/2015 -- ANNUAL REPORT	View image in PDF format
04/18/2014 -- ANNUAL REPORT	View image in PDF format
08/13/2013 -- Florida Limited Liability	View image in PDF format

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # _____ JOB NAME Mark Bauer / Gibraltar Contracting LLC

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

Columbia County issues combination permits. 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 general contractors permit.

NOTE: It shall be the responsibility of the general contractor to make sure that all of the subcontractors are licensed with the Columbia County Building Department.

Use website to confirm licenses: <http://www.columbiacountyfla.com/PermitSearch/ContractorSearch.aspx>

NOTE: If this should change prior to completion of the project, it is your responsibility to have a corrected form submitted to our office, before that work has begun.

Violations will result in stop work orders and/or fines.

ELECTRICAL <input checked="" type="checkbox"/> CC# 76	Print Name <u>Mark Matthews</u> Signature <u>[Signature]</u> Company Name: <u>Matthews Electric</u> License #: <u>EC13005459</u> Phone #: <u>(386) 344-2029</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
MECHANICAL <input type="checkbox"/> A/C CC#	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
PLUMBING <input type="checkbox"/> GAS CC#	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
ROOFING <input type="checkbox"/> CC#	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SHEET METAL <input type="checkbox"/> CC#	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
FIRE SYSTEM <input type="checkbox"/> SPRINKLER CC#	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SOLAR <input type="checkbox"/> CC#	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
STATE SPECIALTY <input type="checkbox"/> CC#	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE

Columbia County Property Appraiser

Jeff Hampton

2020 Working Values

updated: 1/6/2020

Parcel: << 18-5S-17-09280-127 >>

Owner & Property Info

Result: 1 of 1

Owner	GIBALTAR CONTRACTING LLC 20267 NW 248TH WAY HIGH SPRINGS, FL 32643		
Site			
Description*	LOT 27 OAKS OF LAKE CITY PHS 1 WD 1041-2290, WD 1303-2375, WD 1362-1613, WD 1362-1616, WD 1397-1478,		
Area	1.03 AC	S/T/R	18-5S-17
Use Code	VACANT (000000)	Tax District	3

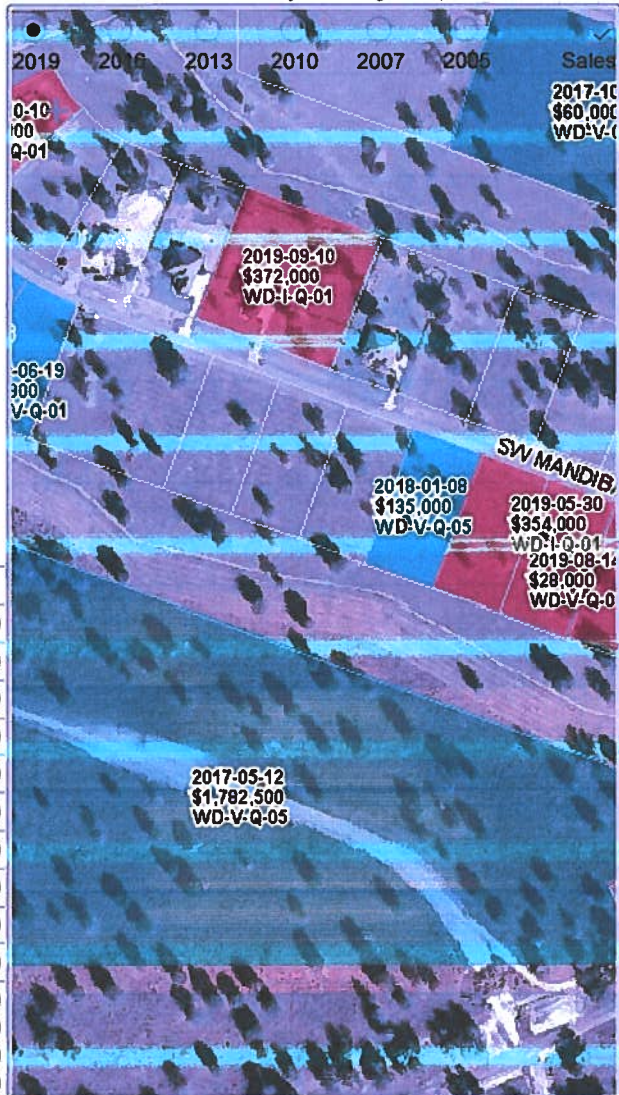
*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

2019 Certified Values		2020 Working Values	
Mkt Land (1)	\$19,500	Mkt Land (1)	\$19,500
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (0)	\$0	Building (0)	\$0
XFOB (0)	\$0	XFOB (0)	\$0
Just	\$19,500	Just	\$19,500
Class	\$0	Class	\$0
Appraised	\$19,500	Appraised	\$19,500
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$19,500	Assessed	\$19,500
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$19,500 city:\$19,500 other:\$19,500 school:\$19,500	Total Taxable	county:\$19,500 city:\$19,500 other:\$19,500 school:\$19,500

Aerial Viewer Pictometry Google Maps



Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
10/24/2019	\$30,000	1397/1478	WD	V	Q	01
6/14/2018	\$100	1362/1616	WD	V	U	11
10/30/2015	\$24,900	1303/2375	WD	V	Q	01

Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
NONE						

Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown



COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21, Lake City, FL 32055

Office: 386-758-1008 Fax: 386-758-2160

www.columbiacountyfla.com/BuildingandZoning.asp

NOTICE TO SWIMMING POOL OWNERS

I, Mark Bauer have been informed and I understand that prior to the final inspection approval and use of my pool, I will need all the inspections approved and the required fencing installed in accordance with applicable regulations. The Florida Building Code requires private residential swimming pools, hot tubs, or non-portable spas containing water over 24 inches deep to meet the following pool barrier safety feature requirements:

- The pool access must be isolated by a barrier at least 4 feet high and installed around the perimeter of the pool.
Unless the pool is equipped with a safety cover complying with the specifications of American Society for Testing and Materials standard F-1346-91.
- The barrier shall not have any gaps or openings which would allow a child to crawl under, squeeze through or climb over and must be placed no less than 20 inches from the water's edge.
- Gates located in the pool barrier must open outward away from the pool and be both self-closing and self latching, with a release mechanism not less than 54" above the standing surface at the gate.
- The barrier must be separate from any other fence, wall, or other enclosure surrounding the yard unless the fence, wall or other enclosure or portion thereof is situated on the perimeter of the pool and meets the pool barrier requirements.
- Where a wall of a dwelling serves as part of the barrier one of the following shall apply:
 - 1) All doors and first floor windows with a sill height of less than 48 inches providing direct access from the home to the pool must be equipped with an alarm that has a minimum sound pressure rating of 85 decibels at 10 feet. The alarm shall sound immediately upon opening the window or door unless the temporary bypass mechanism is activated.
 - 2) Or; all doors providing direct access from the home to the pool must be equipped with a self-closing, self-latching device with a release mechanism located at least 54 inches above the floor.

According to Florida statutes chapter 515: Residential Swimming Pool Safety Act, failure to comply with these requirements is a misdemeanor of the second degree, punishable by imprisonment for up to 60 days or a fine of up to \$500, except that no penalty shall be imposed if within 45 days after arrest or issuance of a summons or notice to appear, the pool is equipped with the aforementioned safety features and the responsible person attends a drowning prevention education program developed by the Florida Department of Health. I also understand that there are several inspections required in addition to a final inspection for my swimming pool.

X

Owner Signature / Date

Address: 20267 NW 248th Way, High Springs, FL 32643

Susan L. Frage

Contractor Signature / Date

1/20/2020

CPC1457969

License Number

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

18-5S-17-09280-127

Clerk's Office Stamp

Inst: 202012002125 Date: 01/27/2020 Time: 2:03PM
Page 1 of 1 B: 1404 P: 838, P. DeWitt Cason, Clerk of Court Colum
County, By: BD
Deputy Clerk

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

1. Description of property (legal description):

a) Street (job) Address:

2. General description of improvements:

3. Owner Information or Lessee information if the lessee contracted for the improvements:

a) Name and address:

b) Name and address of fee simple titleholder (if other than owner):

c) Interest in property:

4. Contractor Information

a) Name and address:

b) Telephone No.:

5. Surety Information (if applicable, a copy of the payment bond is attached):

a) Name and address:

b) Amount of Bond:

c) Telephone No.:

6. Lender

a) Name and address:

b) Phone No.:

7. Person 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 and address:

b) Telephone No.:

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

a) Name:

OF

b) Telephone No.:

9. Expiration date of Notice of Commencement (the expiration date will be 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 YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

STATE OF FLORIDA
COUNTY OF COLUMBIA

10. X

Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager

Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 20th day of January 20 20 by:

Mark Bauer as owner

(Name of Person)

(Type of Authority)

for (name of party on behalf of whom instrument was executed)

Personally Known ☒ OR Produced Identification ☐ Type

Notary Signature

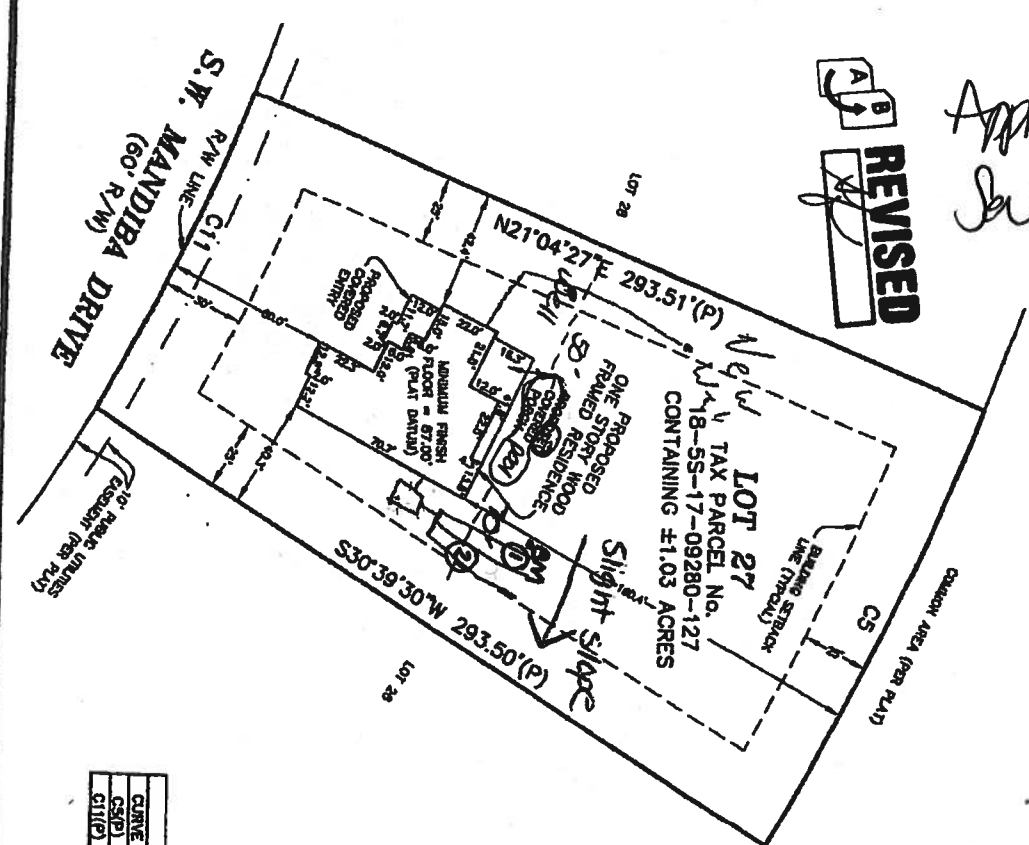
Notary Stamp or Seal:



Susan Lee Frazee
NOTARY PUBLIC
STATE OF FLORIDA
Comm# GG911469
Expires 12/16/2023

Approved
 Raldi Ford
 1-27-20

REVISED



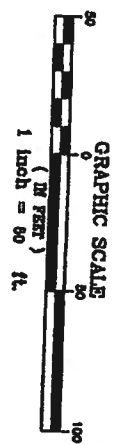
Re sub 10-29-19
 Ronald Ford - Ford's Septic

PLOT PLAN

IN SECTION 16, TOWNSHIP 9 SOUTH, RANGE 17 EAST
 COLUMBIA COUNTY, FLORIDA
 THIS IS NOT A BOUNDARY SURVEY

LEGAL DESCRIPTION
 LOT 27, OAKS OF LAKE CITY
 PHASE 1, A PLANNED RURAL
 RESIDENTIAL DEVELOPMENT, AS PER
 PLAT THEREOF RECORDED IN PLAT
 BOOK 9, PAGE 48-52 OF THE
 PUBLIC RECORDS OF COLUMBIA
 COUNTY, FLORIDA.

LEGEND
 (P) = PER PLAT
 R/W = RIGHT OF WAY



SURVEYOR NOTES:
 1. THE BEARINGS SHOWN HEREON ARE
 BASED ON THE REPLAT OF OAKS OF LAKE
 CITY PHASE 1.
 2. RECORDED EASEMENT AND/OR DEEDS
 NOT FURNISHED TO THE SURVEYOR ARE
 NOT SHOWN.
 3. THIS IS NOT A BOUNDARY SURVEY

CURVE	LENGTH	RADIUS	DELTA	TANGENT	CHORD	CHORD BEARING
CS(P)	178.82'	1023.50'	53.41°	88.88'	178.70'	S84.17°26'E
CI1(P)	127.82'	730.00'	100.58°	64.08'	127.66'	N84.21°27'W



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 19-0826
DATE PAID: 11/12/19
FEE PAID: 31000
RECEIPT #: 4321003

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Gibraltar Contracting, LLC - MF Butler Homes

AGENT: Mark Bauer TELEPHONE: 352-283-2002

MAILING ADDRESS: gibraltarcontracting@gmail.com

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(b) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 27 BLOCK: SUBDIVISION: Oaks of Lake City PLATTED: yes

PROPERTY ID #: 18-5S-17-09280-127 ZONING: Res. I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 1.03 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ [Y / N]

DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: 831 SW Mandiba Dr. Lake City 32024

DIRECTIONS TO PROPERTY: Take Hwy 47 South to CR 240. Left on CR 240. Continue to SW Tustenugee Ave. Turn Right. Follow to SW Mandiba Dr. on Right. Left on SW Custom Made Cir til intersects w/ SW Mandiba Dr. again. Turn Right. Property is on Right side

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	New SFD	4	2205	H/c
2			3393	TOTAL
3	pool added		1-27-20	
4				

☐ Floor/Equipment Drains ☐ Other (Specify)

SIGNATURE: RC Ford RONALD FORD

DATE: 10-29-19

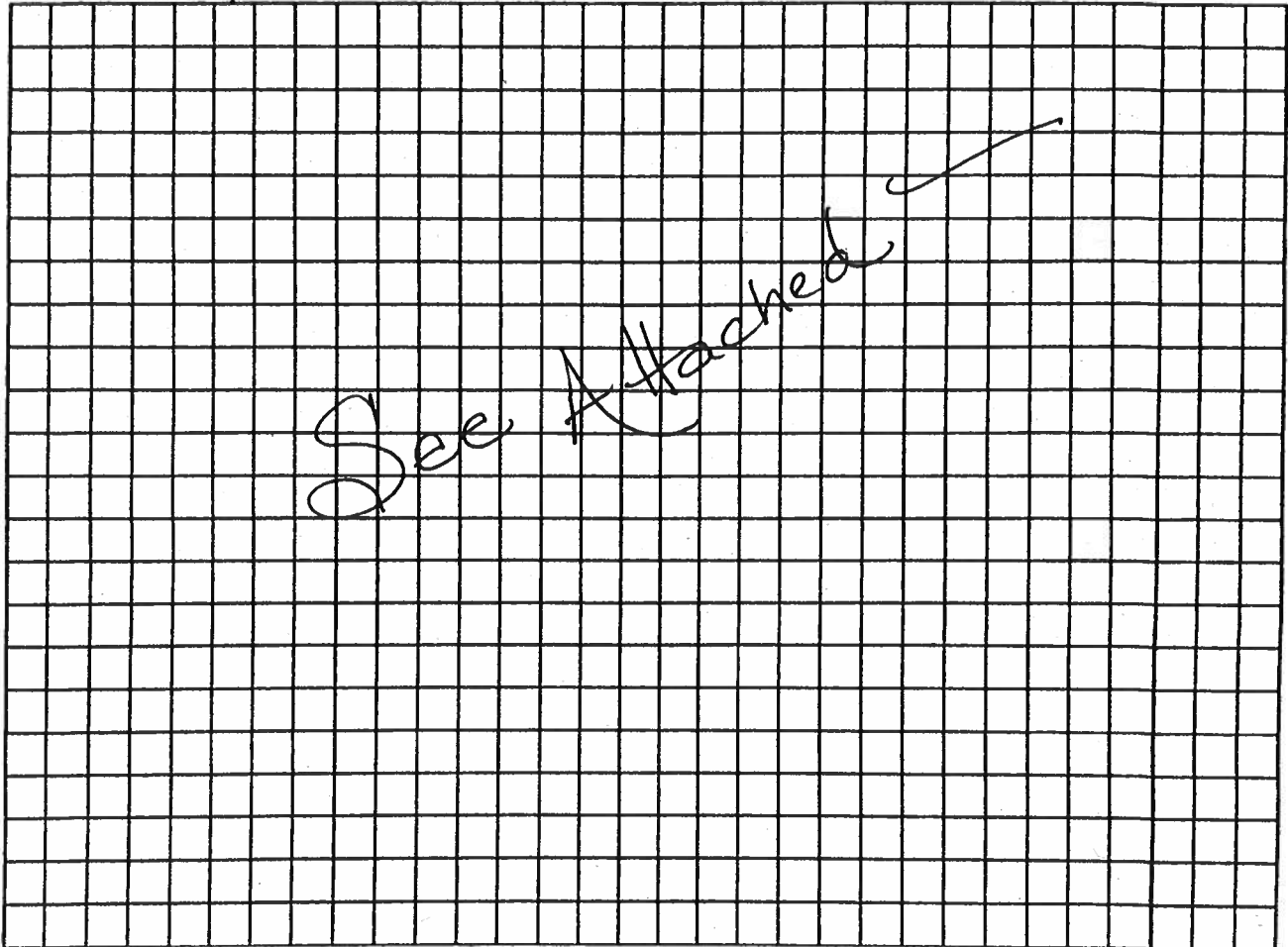
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

19-88260

----- PART II - SITEPLAN -----

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: _____

Site Plan submitted by: _____

RC and - Ronald Ford

Plan Approved ☒ _____

Not Approved ☐ _____

Date

11/14/19

By _____

[Signature]

ESI

Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT