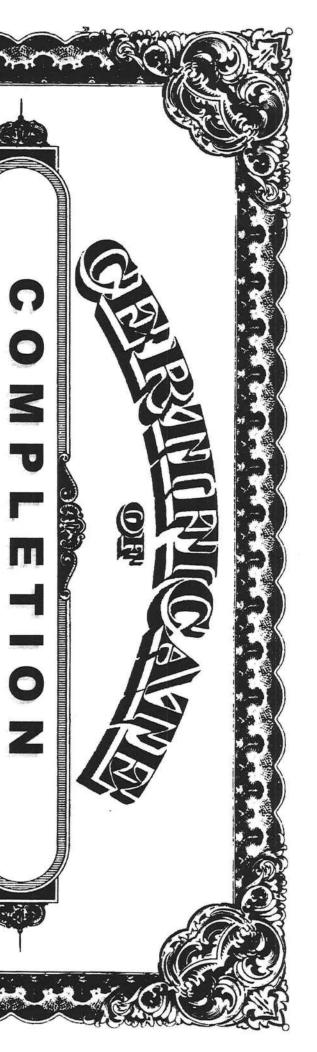
Columbia County Building Permit PERMIT DATE 01/04/2013 This Permit Must Be Prominently Posted on Premises During Construction 000030697 **BRANDI ROBERTS** APPLICANT PHONE 386.754.5555 **ADDRESS** 248 SE NASSAU STREET LAKE CITY FL 32025 OWNER LINDA LEWANDOWSKI PHONE ADDRESS 228 SE BRACKEN WAY LAKE CITY FL 32025 MATTHEW ERKINGER, SR. CONTRACTOR PHONE 386.754.5555 LOCATION OF PROPERTY OLD COUNTRY CLUB TO JEREMY PLACE, TR TO DEAD END, TL AND PROPERTY IS ON THE R. TYPE DEVELOPMENT REPAIR INTERIOR ESTIMATED COST OF CONSTRUCTION 20000.00 HEATED FLOOR AREA TOTAL AREA HEIGHT **STORIES FOUNDATION** WALLS **ROOF PITCH** 4'12 **FLOOR** LAND USE & ZONING RSF-2 MAX. HEIGHT Minimum Set Back Requirments: STREET-FRONT SIDE NO. EX.D.U. FLOOD ZONE AH DEVELOPMENT PERMIT NO. PARCEL ID 15-4S-17-08360-101 SUBDIVISION **UNIT 101** LOT BLOCK PHASE UNIT RR00067135 Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor **EXISTING** BLK Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident COMMENTS: SECTION 2.3.1. DOE NOT MEET DEFINITION OF SUBSTANTIAL DAMAGE 8951 Check # or Cash FOR BUILDING & ZONING DEPARTMENT ONLY Temporary Power Foundation Monolithic date/app. by date/app. by Under slab rough-in plumbing Sheathing/Nailing date/app. by date/app. by date/app. by Framing Insulation date/app. by date/app. by Electrical rough-in Rough-in plumbing above slab and below wood floor date/app. by date/app. by 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 Pump pole **Utility Pole** M/H tie downs, blocking, electricity and plumbing date/app. by date/app. by date/app. by Reconnection date/app. by date/app. by date/app. by **BUILDING PERMIT FEE \$** 100.00 **CERTIFICATION FEE \$** 0.00 SURCHARGE FEE \$ MISC. FEES \$ ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$ FLOOD DEVELOPMENT FEE \$ OOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 175.00 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.

NOTICE: ALL OTHER APPLICABLE STATE OR FEDERAL PERMITS SHALL BE OBTAINED BEFORE COMMENCEMENT OF THIS

PERMITTED DEVELOPMENT.
"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.



COLUMBIA COUNTY, FLORIDA

epartment of Building and Zoning Inspection

Parcel Number 15-4S-17-08360-101 This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code. Type REPAIR INTERIOR Building permit No. 000030697

Permit Holder MATTHEW ERKINGER, SR.

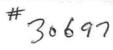
Owner of Building LINDA LEWANDOWSKI

Location: 228 SE BRACKEN WAY, LAKE CITY, FL 32025

Date: 03/25/2013

Building Inspector

POST IN A CONSPICUOUS PLACE (Business Places Only)





Lake City (386) 755-3611 Gainesville (352) 494-575% Fax (386) 755-3885 Toll Free 1-800-616-4707

Certificate of Compliance for Termite Protection

(as required by Florida Building Code (FBC) 1816.1.7)

Aspen Pest Control, Inc. (386) 755-3611 State License # - JB182948 State Certification # - JF104376

228 SE Bracken Way, Unit 101 & 102, Lake City, FL 32025

Address of Treatment or Lot/Block of Treatment

SoilBarrier

(Method of Termite Prevention Treatment - Soil Barrier, Wood Treatment, Bait System, Other

Horizontal, Vertical and Exterior Treatment

Description of Treatment

The above named structure has received a complete treatment for the prevention of subterranean termites. Treatment was done in accordance with the rules and laws established by the Florida Department of Agriculture and Consumer Services.

Authorized Signature

Z/7/13







Columbia County Building Permit Application Worksheet

| - War cover |
|--|
| For Office Use Only Application # 1212 - 41 Date Received 220/12 By Ltt Permit # 30691 |
| Zoning Official Date Date Flood Zone Him Land Use Es Jour De Zoning KSF - L |
| FEMA Map # 0313 C Elevation NA MFE NA River NA Plans Examiner 1.C. Date 1-2-13 |
| Comments Sect 2:3.1 Des not meet definition of Substantial Damage |
| NOC JEH Deed or PA Justite Plan Justate Road Info WWell letter 1911 Sheet - Parent Parcel # |
| Dev Permit # In Floodway Letter of Auth. from Contractor F W Comp. letter |
| IMPACT FEES: EMS Fire Corr Sub VF Form Road/Code School = TOTAL (Suspended) #Ellisville Water □ App Fee Paid |
| Septic Permit No. N/A Fax 386 719 9899 |
| Name Authorized Person Signing Permit Matthcw A. Erkinger St Phone 386.754.5555 |
| Address 248 SE Nassau St, Lake City FL 32025 |
| Owners Name Linda Lewandowski Phone |
| 911 Address 228 SE Bracken Wan, Lake City, FL - Unit 101 |
| Contractors Name ERKINGER CONSTRUCTION GRP Extinger, Phone 386. 754.5555 |
| Address 248 SE Nassau St, Lake City, FL 32025 |
| Fee Simple Owner Name & Address N/A |
| Bonding Co. Name & Address N/A |
| Architect/Engineer Name & Address N/A |
| Mortgage Lenders Name & Address NAME |
| Circle the correct power company – FL Power & Light – Clay Elec. – Suwannee Valley Elec. – Progress Energy |
| Property ID Number 15-48-17-08360-101 Estimated Cost of Construction \$20,000 |
| Subdivision Name_N/ALot Lot Block Unit Phase |
| Driving Directions Drive South on Old Country Club Road to Jeremy |
| Place. Turn Right. Drive to dead end. Turn left. Property |
| is on Right. Number of Existing Dwellings on Property |
| Construction of Repair Interior Flood damage Total Acreage 35 Lot Size |
| Do you need a - <u>Culvert Permit</u> or <u>Culvert Waiver</u> or <u>Have an Existing Drive</u> Total Building Height |
| Actual Distance of Structure from Property Lines - Front Side Side Rear |
| Number of Stories Heated Floor Area 1628 Total Floor Area 2444 Roof Pitch 4/12 |
| 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 |

15: inche result part for Spolato Brandi & Mayllow 12-21-12

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 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.

YOU ARE HEREBY NOTIFIED as the recipient of a NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE: 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 DWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCMENT 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.

| 0,000 | (Owners Must Sign All Applications Before Permit Issuance.) |
|--|---|
| Suns Signature "OWNER BUILDERS MU | IST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT. |
| CONTRACTORS AFFIDAVIT: By my signature I under written statement to the owner of all the above writtens Building Permit including all application and permit including all applications. | stand and agree that I have informed and provided this tten responsibilities in Columbia County for obtaining ermit time limitations. |
| Contractor's Signature (Permitee) | Contractor's License Number RECCUTISC Columbia County Competency Card Number CCCIC4 |
| Affirmed under penalty of perjury to by the Contractor a | and subscribed before me this <u>HE</u> day of <u>DECENTOF</u> 2012. |
| Personally known or Produced Identification State of Florida Notary Signature (For the Contractor) | SEAL: Notary Public State of Florida Brandi N Roberts My Commission EE 843223 Expires 10/14/2016 Revised 3-15-12 |

Page 2 of 2 (Both Pages must be submitted together.) Revised 3-15-12

SUBCONTRACTOR VERIFICATION FORM

| APPLICATION NUMBER | 1212-Al | CONTRACTOR ERKINGER CONSTRUCTION PHONE 386. 754.5555 |
|--------------------|-------------------|--|
| | THIS FORM MUST BE | SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT GROUP |

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> 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 NameN/A | Signature |
|---------------------------|--|--|
| | License #: | Phone #: |
| MECHANICAL/ A/C 1052 | Print Name Register's Heating & AIL License #: CACO41267 | Signature Kichard C. Register Phone #: 904-384-2862 |
| PLUMBING/ GAS 441 | Print Name High Springs Plumb. & Air License #: CFC1428234 | Signature |
| ROOFING | Print NameN/P: License #: | SignaturePhone #: |
| SHEET METAL | Print NameN / A License #: | SignaturePhone #: |
| FIRE SYSTEM/ SPRINKLER | Print Name_N / A License#: | SignaturePhone #: |
| SOLAR | Print Name_N/A License #: | SignaturePhone #: |

| Specialty License | License Number | Sub-Contractors Printed Name | Sub-Contractors Signature |
|---------------------|----------------|------------------------------|--|
| MASON | | NIA | |
| CONCRETE FINISHER | | NIA | |
| FRAMING | 00035 | Ponton Construction | MITT |
| INSULATION 154 | CBC1257313 | Erkinger Construction | The state of the s |
| STUCCO | | NA | |
| DRYWALL | 001197 | RV DRNWall | Forston mossa |
| PLASTER | , | NIA | -000 |
| CABINET INSTALLERS4 | CBC1257313 | Erkinger construction | DiD ~ |
| PAINTING 154 | CBL1257313 | ERKINGER Construction | Dar |
| ACOUSTICAL CEILING | | NIA | |
| GLASS | | NIA | |
| CERAMIC TILE | | NIA | |
| FLOOR COVERING | 010000 | Vann Carpet one | - IAN |
| ALUM/VINYL SIDING | | NIA | |
| GARAGE DOOR | | NIA | |
| METAL BLDG ERECTOR | | NIA | |

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

Next >>

Columbia County Property Appraiser

CAMA updated: 12/19/2012

Parcel: 15-4S-17-08360-101

<< Next Lower Parcel Next Higher Parcel >>

Owner & Property Info

| 33 BERMUD SA | | | | | | |
|---|--|--|--|--|--|--|
| ASHVILLE, NC | 33 BERMUD SAND DR ASHVILLE, NC 28806 | | | | | |
| 228 SE BRACKEN WAY | | | | | | |
| MULTI-FAMI (000800) | | | | | | |
| 2 (County) Neighborhood 15417 | | | | | | |
| 0.000 ACRES Market Area 06 | | | | | | |
| NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. | | | | | | |
| 2 | AULTI-FAMI (County) 0.000 ACRES NOTE: This description for the | MULTI-FAMI (000800) 2 (County) Neighborhood 0.000 ACRES Market Area NOTE: This description is not to be used as | | | | |

2012 Tax Year

Tax Estimator Tax Collector Property Card Parcel List Generator Interactive GIS Map Print

Search Result: 1 of 2



Property & Assessment Values

| 2012 Certified Values | | |
|-----------------------|----------|---|
| Mkt Land Value | cnt: (0) | \$11,016.00 |
| Ag Land Value | cnt: (1) | \$0.00 |
| Building Value | cnt: (1) | \$54,432.00 |
| XFOB Value | cnt: (1) | \$700.00 |
| Total Appraised Value | | \$66,148.00 |
| Just Value | | \$66,148.00 |
| Class Value | | \$0.00 |
| Assessed Value | | \$66,148.00 |
| Exempt Value | | \$0.00 |
| Total Taxable Value | | Cnty: \$66,148 Other: \$66,148 Schl: \$66,148 |

2013 Working Values 2013 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

| ualified Sale | Sale RCode | Sale Price | |
|---------------|------------|-------------|--|
| 0 | | \$64,200,00 | |

Show Similar Sales within 1/2 mile

| Sale Date | OR Book/Page | OR Code | Vacant / Improved | Qualified Sale | Sale RCode | Sale Price |
|-----------|--------------|---------|-------------------|----------------|------------|-------------|
| 9/27/1996 | 828/2240 | WD | I | Q | | \$64,200.00 |
| 4/1/1985 | 561/478 | WD | V | Q | | \$5,000.00 |

Building Characteristics

| Bldg Item | Bldg Desc | Year Blt | Ext. Walls | Heated S.F. | Actual S.F. | Bldg Value |
|-----------|----------------------|----------------|---------------------|-------------------|-------------|-------------|
| 1 | DUPLEX (002700) | 1985 | WD FR STUC (16) | 1628 | 2444 | \$53,093.00 |
| | Note: All S.F. calcu | ulations are l | pased on exterior b | uilding dimension | ons. | |

Extra Features & Out Buildings

| Code | Desc | Year Blt | Value | Units | Dims | Condition (% Good) |
|------|-------|----------|----------|-------------|-----------|--------------------|
| 0258 | PATIO | 0 | \$700.00 | 0000001.000 | 0 x 0 x 0 | (000.00) |

Land Breakdown

| Lnd Code Desc | | Units | Adjustments | Eff Rate | Lnd Value | |
|---------------|---|-------|-------------|----------|-----------|--|
| 1 | T | | | 1 | | |

THIS INSTRUMENT WAS PREPARED BY:

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

96-14113

1998 CCT -! 1:: 4: 00

RETUP" TO:

TERRY McDAVID
POST OFFICE BC: 1328
LAKE CITY, FL 32056-1328

Grantee #1 S.S. No.

Property Appraiser's identification Number 15-4s-

77.

WARRANTY DEED

THIS INDENTURE, made this ATH day of September, 1936, BETWEEN David J. Houseman, and his wife Laura R. Houseman, whose post office address : 3413 Winfield Dunn Parkway, Kodak, Tennessee 37764 of the County of Sevier, State of Tennessee grantor*, and Linda M. Lewandowski, whose post office address is Route 8 Box 465-0, Lake City, Florida 32025, of the County of Columbia, State of Florida, grantee*.

WITNESSETH: that said grantor, for and in consideration of the sum of Ten Dollars (\$10.00), and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Columbia County, Florida, to-wit:

TOWNSHIP 4 SOUTH, RANGE 17 EAST

SECTION 15: Commence at the NW corner of NW 1/4 of SW 1/4 and run thence S 01°25'46" E along the West line of said Section 15 a distance of 804.69 feet to the POINT OF BEGINNING; thence run N 88°41'16" E 119.73 feet to the West right-of-way line of Maple Lane; thence S 01°14'10" F along said West right-of-way line 122.00 feet to the North right-of-way line of Pine Lane; thence S 88°41'16" West along the North right-of-way line of Pine Lane a distance of 119.32 feet to the West line of said Section 15; thence N 01°25'46" W along the West line of said Section 15 a distance of 122.00 feet to the POINT OF BEGINNING Columbia County, Florida.

SUB. ECT TO: Restrictions, easements and outstanding mineral rights of record, if any, and taxes for the current year.

and said grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

*"Grantor" and "grantee" are used for singular or plural, as

DESCRIPTION STATE 449 U.C. PRINCIPLE TAX E CLERK OF CHARTS CHAMMER COUNTY OF CHARTS CHAMMER COUNTY OF THE COUNTY O

context requires.

IN V ILESS WHEREOF, grantor has hereunto set grantor's hand

id seal the day and year first above written. OFFICIAL RECORDS

Signe scaled and delivered in on. press de:

(Signature of First Witness)

David J. Houseman

(Typed Name of First Witness)

(Signature of Second Witness)

(Typed Name of Second Witness)

Laura R. Houseman

STATE OF TENNESSEE COUNTY OF ______ VI

The foregoing instrument was acknowledged before me this 27th day of September, 1996, by David J. Houseman, and his wife Laura R. Houseman, who is/are personally known to me or who has/have produced _____ as identification and who did not take an oath.

My Commission Expires:

4.01.97

Notary Public
Printed, typed, or stamped name:



1212-14

ERKINGER

Construction Group

248 SE Nassau Street Lake City, FL 32025 Lic. # CBC1257313/RR0067135

Contracting Construction Management

Phone: 386.754.5555 Fax: 386.719.9899 www.erkingerhomes.com

Adams Agency 228 SE Bracken Way Lake City, FL 32024

Scope of Work: Repair water damage to duplex due to storm. Repair includes replacing interior finishes 2' high.

REMOVE: 447 linear feet of base moulding. 894 square feet of ½" dywall – 2' high on all walls. 258 square feet of 3 ½" fiberglass insulation. 12' of base cabinets and tops in kitchen. 3' vanity base in bathroom. HVAC base in garage and return air vent. (5) hollow core swing doors and trim. (5) sets of bifold doors and trim. 606 square feet of carpet, pad and tack strips. 182 square feet of 1 piece vinyl. (1) toilet. Dispose of all removed material.

INSTALL: 258 square feet of 3 ½" fiberglass insulation. 894 square feet of blueboard drywall with hardcoat – 2' high throughout. 447 linear feet of 3 ¼" base moulding. Build new HVAC base in garage and reconnect system. New return air vent with filter. (5) hollow core interior doors. (5) sets of bifold doors and trim. Reinstall existing toilet. 30" Bath vanity with existing countertop, sink and faucet. 12' of base cabinets in kitchen using existing countertops, sink and faucet. 788 square feet of vinyl planking throughout to include bedrooms, kitchen, bath and common areas. Reconnect all sinks and drains.

Paint both units - including all walls and ceilings throughout.

Note: This estimate does NOT include any exterior work.

| Page 1 | of 1 |
|--------|------|
| | - |

Permit #30697 228 SE Bracken Way Unit 101

SFHA FLOOD DISCLOSURE STATEMENT

| The undersigned, Lindo 122 SW Midfown P. La COLUMBIA COUNTY, FLORID as follows: | A, to issue a building or other development permit to Owner's property described |
|---|--|
| | Inst 201312000522 Date 1/14/2013 Time 1:05 PM OC P DeWitt Cason Columbia County Page 1 of 1 B 1247 P 1982 |
| Tax Parcel No.: 1 | 5-48-17-08360-101 |
| affected by Tropical Storm Debby w Flood Insurance Maps and does not Building Code and Columbia County dwelling. Should the rebuild, repair dwelling, thus meeting the definition | hich is located in a Special Flood Hazard Area according to the 2009 FEMA meet the requirements of Substantial Damage as defined by the 2010 Florida Land Development Regulations for the rebuild, repair or remodel of an existing or remodel of the dwelling exceed 50 percent of the market value of the of Substantial Damage, then the dwelling shall be required to be brought up to all Florida Building Code and Columbia County Land Development Regulations. |
| Flood Insurance Rate Maps, the prop has been advised to review all availa | perty is located in a Special Flood Hazard Area as designated by the 2009 FEMA berty has flooded in the past and may be subject to flooding in the future. Owner ble flood data including 2012 aerial photographs or other available flood maps in the building permit. Owner is aware that such natural flooding may occur in the |
| representations to Owner whether th damages to Owner's dwelling or oth Statement in the public records of Co | 100 mm - 100 |
| Owner acknowledges having of January, 2012. | g read and received a copy of this Flood Disclosure Statement this 3 Rd day |
| Signed, sealed and delivered in the presence of: Witness Brandi Roberts Print or type name | Owner Jakons fr Cindo Comundous |
| Witness | Co-Owner |
| Print or type name | |
| STATE OF FLORIDA COUNTY OF COLUMBIA | |
| The foregoing instrument w | was acknowledged before me this 38d day of Arnuary, 2013 by who is/are personally known to me or who has/have produced as identification. |
| (NOTARIAL | Notary Public, State of Florida |
| SEAL) | My Commission Expires: |
| | Notary Public State of Florida Brandi N Roberts My Commission EE 843223 Expires 10/14/2016 |

Permit # 30697 228 SE Bracken Way Unit 101

NOTICE OF COMMENCEMENT

Clerk's Office Stamp

Tax Parcel Identification Number:

15-45-17-08360-101

Inst 201312000521 Date 1/14/2013 Time 1 05 PM DC P DeWritt Cason Columbia County Page 1 of 1 B 1247 P 1981

| | ntice that improvements will be made to certa mation is provided in this NOTICE OF COMMI | | ccordance with Section 713.13 of the |
|---|--|--|--|
| _ | | A - LO | |
| Description of property (legal de a) Street (job) Address: | | an Lake 7 | Ites, Ex |
| 2. General description of improvem | | MARC CIUSE | 1 bry flooding |
| 2 Owner Information | | J | - J |
| Name and address: | Inda Lenandowski | | |
| b) Name and address of | ee simple titleholder (if other than owner) _ | NA | |
| c) Interest in property | INNCE | | www. |
| 4. Contractor Information | ERKINGER CONSTRUCT | in Cpano | |
| a) Name and address: | | | 201 710 0000 |
| b) Telephone No : | 28 137 5327 | Fax No. (Opt.) | 236 11 1 12 1 1 |
| Surety Information Name and address: | 11A- | | |
| h) Amount of Bond: | 2//1 | | |
| c) Telephone No | ************************************** | | |
| 6 Lender | ALCOHOL COMPANY OF THE PARTY OF | | The state of the s |
| a) Name and address: _ | | | |
| b) Phone No. | | - | |
| | te of Florida designated by owner upon whom | n notices or other docume | ents may be served: |
| | | · Cita, EL | and the second s |
| b) Telephone No.:5_ | SG: 752-17444 | Fax No. (Opt.) | |
| | | 7.4 12 1 1 N 1 | 18-81-8-41-8 |
| | signates the following person to receive a cop | y of the Lienor's Notice at | s provided in Section |
| 713.13(I)(b), Florida Statutes: a) Name and address: | k //A | | |
| b) Telephone No.: | 12/12 | Fax No. (Opt.) | |
| IMPROPER PAYMENTS UNDER CHA IMPROVEMENTS TO YOUR PROPE INSPECTION. IF YOU INTEND TO O | IENTS MADE BY THE OWNER AFTER THE EXPI APTER 713, PART I, SECTION 713.13, FLORIDA RTY; A NOTICE OF COMMENCEMENT MUST E BTAIN FINANCING, CONSULT YOUR LENDER (| A STATUTES, AND CAN RE BE RECORDED AND POST | SULT IN YOUR PAYING TWICE FOR ED ON THE JOB SITE BEFORE THE FIRST |
| YOUR NOTICE OF COMMENCEMEN | п. | | |
| STATE OF FLORIDA | 11, - | d. Curto. | |
| COUNTY OF COLUMBIA | 10.X (A.K.) | | Y XV. |
| | Signature of Owner | er or Owner's Authorized O | ffice/Director/Partner/Manager |
| | Cin | du Adam | 15 |
| | Printed Name | | - Farmer |
| | 16 | Ath new | ndiare 12 |
| The foregoing instrument was acknow | wledged before me , a Florida Notary, this | day of Line | MDCR 20 12 by: |
| CINAN Adams | * DEODERTH MO | Committee of the Commit | authority, e.g. officer, trustee, attorney |
| 1 1 1 1 1 | The state of the s | in the or | authority, e.g. officer, duster, accorney |
| fact) for LINDA LCWAIT | Idowski - Owner | (name of party on be | ehalf of whom instrument was executed). |
| Personally Known OR Produce | d Identification Type | | |
| Personally known OR Produce | d identification Type | | shift Pile Motory Dublin Date of Plants |
| | 7 - 12 | | Notary Public State of Florida Brandi N Roberts |
| Notary Signature | Notary | Stamp or Seal: | or no Expires 10/14/2016 |
| | -AND- | | |
| 11. Verification pursuant to Secti | on 92.525, Florida Statutes. Under penaltie | es of periury. I declare th | at I have read the foregoing and that |
| the facts stated in it are true | to the best of my knowledge and belief. | | The state of the s |
| | | AIRCLES A | Idamia |
| | | | |
| | Signat | ture of Natural Person Si | gning (in line #10 above.) |