

APPLICANTALEC SAUNDERS

PHONE904.264.0296

ADDRESS2042CARNES STREET

ORANGE PARKFL32073

OWNERSHERRY R. SMITH

PHONE386.755.0279

ADDRESS951SE OCTOBER ROAD

LAKE CITYFL32025

CONTRACTORCLIFFORD BEEDE

PHONE904.264.0296

LOCATION OF PROPERTY

41-S TO C-238,TL GO 1/2 MILE TO OCTOBER RD,TR GO 3/4 MILE

TL @ 951 POSTED ON MAILBOXES.

TYPE DEVELOPMENTSWIMMING POOL

ESTIMATED COST OF CONSTRUCTION25000.00

HEATED FLOOR AREA

TOTAL AREA

HEIGHT

STORIES

FOUNDATION

WALLS

ROOF PITCH

FLOOR

LAND USE & ZONINGA-3

MAX. HEIGHT

Minimum Set Back Requirments:

STREET-FRONT30.00

REAR25.00

SIDE25.00

NO. EX.D.U.1

FLOOD ZONE

DEVELOPMENT PERMIT NO.

PARCEL ID02-6S-17-09553-012

SUBDIVISION

LOT

BLOCK

PHASE

UNIT

TOTAL ACRES10.00

CRC022521

Culvert Permit No.

Culvert Waiver

Contractor's License Number

Applicant/Owner/Contractor

EXISTING

X-06-044

BLK

JTH

N

Driveway Connection

Septic Tank Number

LU & Zoning checked by

Approved for Issuance

New Resident

COMMENTS: NOC ON FILE.

Check # or Cash16742

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 \$125.00

CERTIFICATION FEE \$0.00

SURCHARGE FEE \$0.00

MISC. FEES \$0.00

ZONING CERT. FEE \$50.00

FIRE FEE \$0.00

WASTE FEE \$

FLOOD DEVELOPMENT FEE \$

FLOOD ZONE FEE \$

CULVERT FEE \$

TOTAL FEE175.00

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. 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 INCONVENIENCE, 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.

Notice of Commencement

(PREPARE IN DUPLICATES)

To whom it may concern:

The undersigned hereby informs you that improvements will be made to certain real property, and in accordance with section 713.13 of the Florida Statutes, the following information is stated in this NOTICE OF COMMENCEMENT.

Description of property A part of the SE 1/4 of Section 2, Township 6 South
Range 17 East.

General description of improvements Swimming Pool

Owner Sherry R. Smith

Address 951 SE October Rd, Lake City, FL 32025

Owner's interest in site of the improvement Owner

Fee Simple Title holder (if other than owner) N/A

Name N/A

Address N/A

Contractor Clifford Beede "Pools By Masters, Inc."

Address 2042 Cannes St. Orange Park, FL 32073

Surety (if any) N/A

Address N/A Amount of bond \$ -

Name and address of any person making a loan for the construction of the improvements.

Name N/A

Address N/A

Name of person within the State of Florida, other than himself, designated by owner upon whom notices or other documents may be served:

Name N/A

Address N/A

In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.06 (2) (b), Florida Statutes. (Fill in at Owner's option).

Name N/A

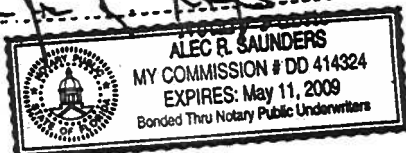
Address N/A

THIS SPACE FOR RECORDER'S USE ONLY

Sherry R. Smith
Owner

Sworn to and subscribed before me this 9th

day of February 2006



Inst: 200605186 Date: 03/06/2006 Time: 12:36
J. P. Dewitt Cason, Columbia County B: 1076 P: 678

Columbia County Building Permit Application

Revised 9-23-04

For Office Use Only Application # 0602-34 Date Received 2/10/06 By JW Permit # 2485
 Application Approved by - Zoning Official BLK Date 15.02.06 Plans Examiner _____ Date _____
 Flood Zone N/A Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3
 Comments _____

Applicants Name ALEC SAUNDERS "Pods By Marlene, Inc." Phone 204.237.6416 - ALEC
 Address 2042 Camas St. Orange Park, FL 32073
 Owners Name Sherry R. Smith Phone 386.755-0279
 911 Address 951 SE October Rd. Lake City, FL 32025
 Contractors Name Clifford Beards - Pods By Marlene, Inc. Phone 904.264.0296
 Address 2042 Camas St. Orange Park, FL 32073
 Fee Simple Owner Name & Address N/A
 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. - Progressive Energy
 Property ID Number 02-65-17-09553-012 Estimated Cost of Construction \$25,000.00
 Subdivision Name AKA - ROLLING HILLS Lot 25 Block _____ Unit _____ Phase _____
 Driving Directions 415 TO L 02 SR 238 go 1/2 mile to R 02 October Rd. go 3/4 mile
Turn L @ 951 mailbox

Type of Construction Swimming Pool, Re-Reinforced Concrete Number of Existing Dwellings on Property 1
 Total Acreage 10 acres Lot Size 19 acres Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
 Actual Distance of Structure from Property Lines - Front 200' Side L- 265' Side R- 225' Rear 580'
 Total Building Height _____ Number of Stories _____ Heated Floor Area _____ Roof Pitch _____

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.

Owner Builder or Agent (Including Contractor)

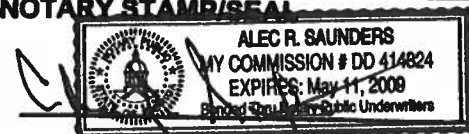
STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me

this 9th day of February 2006

Personally known ✓ or Produced Identification _____

Contractor Signature Clifford Beards
 Contractors License Number CR022521
 Competency Card Number _____
 NOTARY STAMP/SEAL



Notary Signature

Handwritten note: JW [unclear] 029. [unclear] [unclear] message to ALEC

COLUMBIA COUNTY

NOTICE OF TAX EXEMPTION RENEWAL 2006

WIDOW	HOMESTEAD	
500	25,000	

02-65-17-09553-012

FOR LEGAL SEE TAXROLL

FROM J. DOYLE CREWS
PROPERTY APPRAISER
135 NE HERNANDO AVE STE 238
LAKE CITY, FL 32055
DO NOT FORWARD
RETURN SERVICE REQUESTED

TO SMITH SHERRY R
951 SE OCTOBER RD
LAKE CITY, FL

32025

POST CARD

PRESORTED
FIRST CLASS
U.S. POSTAGE
PAID
LAKE CITY, FL
PERMIT 2

Columbia County Property Appraiser

DB Last Updated: 9/16/2005

2005 Proposed Values

Parcel: 02-6S-17-09553-012 HX WX

Tax Record

Property Card

Interactive GIS Map Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	SMITH SHERRY R
Site Address	OCTOBER
Mailing Address	951 SE OCTOBER RD LAKE CITY, FL 32025
Brief Legal	COMM 420 FT S OF NW COR OF SE1/4 FOR A POB, RUN E 840 FT, S 518.57 FT, W 840 FT, N

Use Desc. (code)	IMPROVED A (005000)
Neighborhood	2617.02
Tax District	3
UD Codes	MKTA02
Market Area	02
Total Land Area	10.000 ACRES

Property & Assessment Values

Mkt Land Value	cnt: (1)	\$10,920.00
Ag Land Value	cnt: (1)	\$3,510.00
Building Value	cnt: (1)	\$51,163.00
XFOB Value	cnt: (3)	\$6,650.00
Total Appraised Value		\$72,243.00

Just Value	\$106,173.00
Class Value	\$72,243.00
Assessed Value	\$59,923.00
Exempt Value	(code: HX WX) \$25,500.00
Total Taxable Value	\$34,423.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale Vlmp	Sale Qual	Sale RCode	Sale Price
NONE						

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1983	BD/Batten (06)	1431	1615	\$51,163.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0210	GARAGE U	0	\$3,500.00	1.000	20 x 40 x 0	(.00)
0269	RVP HOOKUP	0	\$1,350.00	1.000	0 x 0 x 0	(.00)
0060	CARPORT F	2005	\$1,800.00	360.000	18 x 20 x 0	(.00)

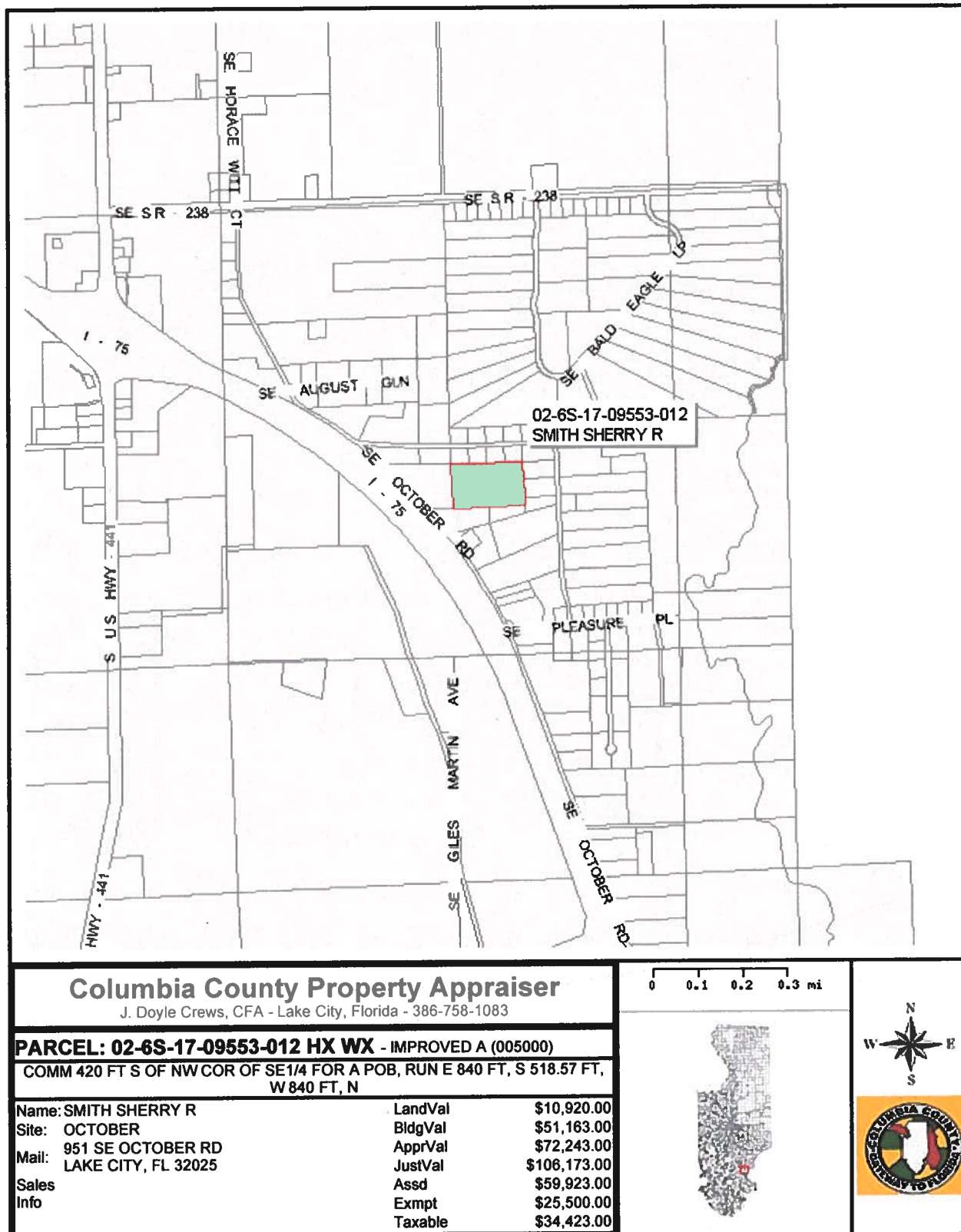
Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000100	SFR (MKT)	1.000 AC	1.00/1.00/1.00/1.00	\$10,920.00	\$10,920.00
006677	PECANS (AG)	9.000 AC	1.00/1.00/1.00/1.00	\$390.00	\$3,510.00
009910	MKT.VAL.AG (MKT)	9.000 AC	1.00/1.00/1.00/1.00	\$0.00	\$37,440.00

Columbia County Property Appraiser

DB Last Updated: 9/16/2005

1 of 1



This information, GIS Map Updated: 8/3/2005, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

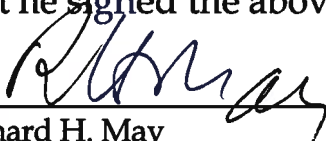
This letter is to serve as authorization for Alec R. Saunders to sign for and pick-up permit related documents under my State License #CPC 022521.



Clifford Louis Beede
Vice President
Pools By Marlene, Inc.
A Florida corporation

State of Florida
County of Clay

Before me, this February 9, 2006, appeared Clifford Louis Beede, personally know to me and known to be the Vice President of Pools By Marlene, Inc., a Florida corporation, who acknowledged that he signed the above document for the purposes intended therein.



Richard H. May
Notary Public, State of Florida, At Large
My Commission # DD286135 expires on January 29, 2008
Personally Known



Richard H. May
MY COMMISSION # DD286135 EXPIRES
January 29, 2008
BONDED THRU TROY FAIR INSURANCE, INC.

ACORD CERTIFICATE OF LIABILITY INSURANCE		OP ID JR POOL927	DATE (MM/DD/YYYY) 01/23/06
PRODUCER Insurance By Ken Brown, Inc. P.O. Box 540569 1339 Arlington Street Orlando FL 32805 Phone: 407-849-0490 Fax: 407-648-0197		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED Pools By Marlene Inc 2042 Carnes St Orange Park FL 32073		INSURERS AFFORDING COVERAGE INSURER A: Amerisure Ins Company INSURER B: Amerisure Mutual Ins. Co INSURER C: INSURER D: INSURER E:	NAIC # 19488 23396

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	<input checked="" type="checkbox"/>	GENERAL LIABILITY	GL202022302	05/01/05	05/01/06	EACH OCCURRENCE \$ 300,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 5,000
		<input checked="" type="checkbox"/> Pool Pop				PERSONAL & ADJ INJURY \$ 300,000
		GEN'L AGGREGATE LIMIT APPLIES PER				GENERAL AGGREGATE \$ 600,000
		<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				PRODUCTS - COMP/OP AGG \$ 600,000
B	<input checked="" type="checkbox"/>	AUTOMOBILE LIABILITY	CA202022101	05/01/05	05/01/06	COMBINED SINGLE LIMIT (Ea accident) \$ 500,000
		<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
		<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
		<input type="checkbox"/> HIRED AUTOS				
		<input type="checkbox"/> NON-OWNED AUTOS				
		GARAGE LIABILITY				
		<input type="checkbox"/> ANY AUTO				ALTO ONLY - EA ACCIDENT \$
						OTHER THAN EA ACC \$
						ALTO ONLY AGG \$
		EXCESS/UMBRELLA LIABILITY				
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				EACH OCCURRENCE \$
		<input type="checkbox"/> DEDUCTIBLE				AGGREGATE \$
		RETENTION \$				\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				IF STATE TORY LAWS OR OTHER \$
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$
		OTHER				E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER**COLUMBI**

Columbia County
 P.O. Drawer 1529
 Lake City FL 32056

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL **10** DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



AC# 1438443

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L04060701540

DATE	BATCH NUMBER	LICENSE NBR
06/07/2004	030705833	CPC022521

The RESIDENTIAL POOL/SPA CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2006

BEEDE, CLIFFORD LOUIS
POOLS BY MARLENE INC
2042 CARNES ST
ORANGE PARK FL 32073

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

2005-2006 OCCUPATIONAL LICENSE TAX

MIKE HOGAN

OFFICE OF THE TAX COLLECTOR

CITY OF JACKSONVILLE and/or COUNTY OF DUVAL, FLORIDA

231 EAST FORSYTH STREET ROOM 130, JACKSONVILLE, FL 32202 PHONE: (904)630-2080 FAX: (904)630-1432

Note: A penalty is imposed for failure to keep this license exhibited conspicuously at your establishment or place of business.

This license is furnished in pursuance of chapter 770-772 City ordinance codes.

BEEDE, CLIFFORD L
POOLS BY MARLENE INC
2042 CARNES ST
ORANGE PARK, FL 32073-5414

10

ACCOUNT NUMBER: 049283-0000-1

LOCATION ADDRESS:

DESCRIPTION: QUALIFYING AGENT, CONTRACTORS

County License Code: 770.000-005
Municipal License Code: 772.325

County Tax: N/A
Municipal Tax: \$100.00
Total Tax Paid: \$100.00

VALID FROM OCTOBER 1, 2005 TO SEPTEMBER 30, 2006

RCPT #: 001T000293 DATE: 8/05/2005 AMT: \$100.00

ATTENTION

AC# 2025492

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L0506090

DATE	BATCH NUMBER	LICENSE NBR
06/09/2005	040970765	QB0001018

The BUSINESS ORGANIZATION
Named below IS QUALIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2007

(THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS
COMPANY TO DO BUSINESS ONLY IF IT HAS A QUALIFIER.)

POOLS BY MARLENE INC
2042 CARNES STREET
ORANGE PARK FL 32073

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

2005-2006 OCCUPATIONAL LICENSE TAX

MIKE HOGAN

OFFICE OF THE TAX COLLECTOR

CITY OF JACKSONVILLE and/or COUNTY OF DUVAL, FLORIDA

231 EAST FORSYTH STREET ROOM 130, JACKSONVILLE, FL 32202 PHONE: (904)630-2080 FAX: (904)630-1432

Note: A penalty is imposed for failure to keep this license exhibited conspicuously at your establishment or place of business.

This license is furnished in pursuance of chapter 770-772 City ordinance codes.

POOLS BY MARLENE INC
ROWLAND P & CLIFFORD L BEEDE
2042 CARNES ST
ORANGE PARK, FL 32073-5414

10

ACCOUNT NUMBER: 049282-0000-5

LOCATION ADDRESS:

DESCRIPTION: CONTRACTOR, ALL TYPES

County License Code: 770.307-001
Municipal License Code: 772.309

County Tax: \$11.25
Municipal Tax: \$56.25
Total Tax Paid: \$67.50

VALID FROM OCTOBER 1, 2005 TO SEPTEMBER 30, 2006

RCPT #: 001T000292 DATE: 8/05/2005 AMT: \$67.50

ATTENTION

AC# 2023365

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L05060901091

DATE	BATCH NUMBER	LICENSE NBR
06/09/2005	040970766	RP0033104

The SWIMMING POOL/SPA SERVICING CONTRACTOR
Named below HAS REGISTERED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2007
(INDIVIDUAL MUST MEET ALL LOCAL LICENSING
REQUIREMENTS PRIOR TO CONTRACTING IN ANY AREA)

BEEDE, ROWLAND P
MARLENES POOL CARE INC
2042 CARNES STREET
ORANGE PARK FL 32073

JEB BUSH
GOVERNOR

DIANE CARR
SECRETARY

DISPLAY AS REQUIRED BY LAW

TOM GALLAGHER
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

** CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW **

CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation Law.

EFFECTIVE DATE: 07/01/2005

** EXPIRATION DATE: 07/01/2007

PERSON: BEEDE ROWLAND P
FEIN: 593098969
BUSINESS NAME: POOLS BY MARLENE INC
AND ADDRESS: 2042 CARNES STREET
ORANGE PARK FL 32073

SCOPE OF BUSINESS 1 - SWIMMING POOL CONTRACTOR
OR TRADE:

IMPORTANT: Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.

QUESTIONS? 850 413-1511

DWC 252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-04

06-17-2005



TOM GALLAGHER
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

** CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW **

CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation Law.

EFFECTIVE DATE: 07/01/2005

** EXPIRATION DATE: 07/01/2007

PERSON: BEEDE CLIFFORD
FEIN: 593098969
BUSINESS NAME: POOLS BY MARLENE INC
AND ADDRESS: 2042 CARNES STREET
ORANGE PARK FL 32073

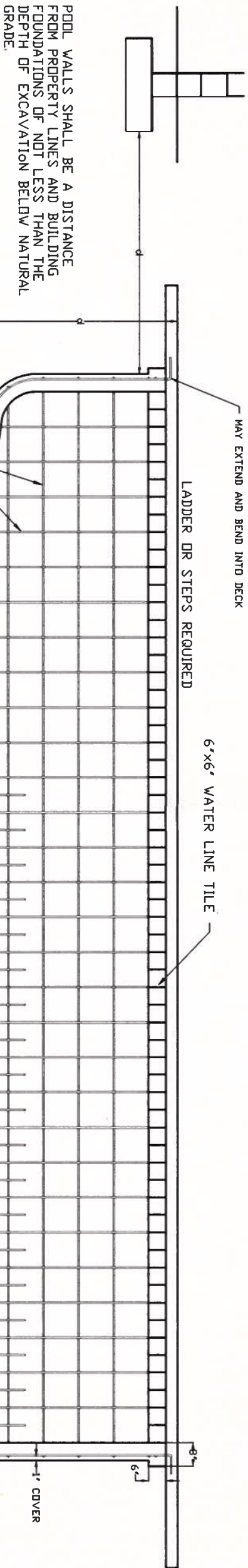
SCOPE OF BUSINESS 1 - SWIMMING POOL CONTRACTOR
OR TRADE:

IMPORTANT: Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.

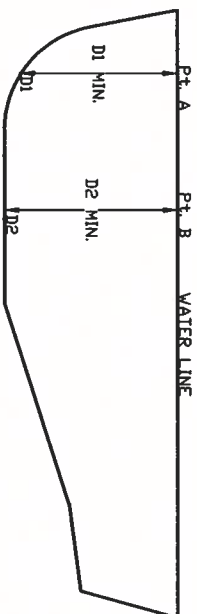
QUESTIONS? 850

DWC 252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-04

Copy



TYPICAL POSITION OF TIP OF BOARD RELATIVE TO Pt. A



FOR POOLS OVER 6' DEPTH THE FOLLOWING REBAR SPACING IS REQUIRED:
6'-7', #3 @ 8" O.C. MAX.
7'-8', #3 @ 5" O.C. MAX.
BEGINNING AT 4' DEPTH, AND EXTENDING 2' ABOVE AND BELOW COVES AND 5' ABOVE AND BELOW FLOOR BREAK.

TYPICAL SECTION THRU POOL
ACTUAL CONFIGURATION MAY VARY

MINIMUM WATER DEPTHS AND DISTANCES BASED ON BOARD
HEIGHT FOR PRIVATE POOLS. *

BOARD HEIGHT	MINIMUM DEPTH AT DIA DIRECTLY UNDER END OF BOARD	DISTANCE BETWEEN D1 AND D2	MINIMUM DEPTH AT D2
18" (1/2 METER)	6'0"	7'0"	7'6"
22" (2/3 METER)	6'10"	7'6"	8'0"
26" (3/4 METER)	7'5"	8'0"	8'0"

* BOCA NATIONAL BUILDING CODE, 1990

C.R. Caudel, P.E.
555-F Blanding Blvd. Orange Park, Florida
Phone (904)269-0810

DRAWN BY
J. CAUDEL

8-22-1995

POOLS BY MARLENE
2042 CARNES STREET
ORANGE PARK, FL 32073
(904) 264-0296

STATE CERTIFIED SWIMMING
POOL CONTRACTOR
CPC 022521

TYPICAL SECTION AND NOTES.