

DATE 01/16/2007

Columbia County Building Permit**PERMIT**

This Permit Expires One Year From the Date of Issue

000025411

APPLICANT ADAM PAGE PHONE 752-7578
 ADDRESS PO BOX 2166 LAKE CITY FL 32056
 OWNER CLINTON DICKS JR PHONE _____
 ADDRESS 4458 S US HWY 441 LAKE CITY FL 32025
 CONTRACTOR ONEAL ROOFING PHONE 752-7578
 LOCATION OF PROPERTY 441 S, R INTO TERRY DICKS TRUCKING @ OFFICE

TYPE DEVELOPMENT RE-ROOF COMM ESTIMATED COST OF CONSTRUCTION 14000.00
 HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT _____ STORIES 1
 FOUNDATION _____ WALLS _____ ROOF PITCH 4/12 FLOOR _____
 LAND USE & ZONING _____ MAX. HEIGHT 35
 Minimum Set Back Requirements: STREET-FRONT _____ REAR _____ SIDE _____
 NO. EX.D.U. 1 FLOOD ZONE _____ DEVELOPMENT PERMIT NO. _____

PARCEL ID 20-4S-17-08584-001 SUBDIVISION _____
 LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES _____

CCC163346
 Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
 EXISTING X07-031 LH LH N
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: NOC ON FILECheck # or Cash 16401**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 \$ 70.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
 MISC. FEES \$ 0.00 ZONING CERT. FEE \$ _____ FIRE FEE \$ 0.00 WASTE FEE \$ _____
 FLOOD DEVELOPMENT FEE \$ _____ FLOOD ZONE FEE \$ _____ CULVERT FEE \$ _____ **TOTAL FEE** 70.00
 INSPECTORS OFFICE L. V. 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 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.

Columbia County Building Permit Application

Revised 9-23-04

For Office Use Only Application # 0701-56 Date Received 1-16-07 By CH Permit # 25411
Application Approved by - Zoning Official _____ Date _____ Plans Examiner _____ Date _____
Flood Zone _____ Development Permit _____ Zoning _____ Land Use Plan Map Category _____
Comments _____

Applicants Name ADAM PAVE Phone 752-7578
Address PO BOX 2166 - LAKE CITY, FL 32056
Owners Name CLINTON F DICK JR. Phone _____
911 Address 4458 S. US HWY 441 - LAKE CITY, FL 32025
Contractors Name ONCAL ROOFING CO. Phone 752-7578
Address PO BOX 2166 - LAKE CITY, FL 32056
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 Energy
Property ID Number 20-45-17-08584-001 Estimated Cost of Construction \$14,000
Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____
Driving Directions GO SOUTH ON 441/41 - TERRY DICKS TRUCKING
OFFICE WILL BE ON RIGHT JUST PASS TUSKUGUEE ST.

Type of Construction RE-ROOF Number of Existing Dwellings on Property _____
Total Acreage _____ Lot Size _____ Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
Actual Distance of Structure from Property Lines - Front _____ Side _____ Side _____ Rear _____
Total Building Height _____ Number of Stories 1 Heated Floor Area 3904 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.

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.

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Adam Pave
Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me
this 11th day of January 2007.
Personally known ✓ or Produced Identification _____

John W. Edge
Contractor Signature
Contractors License Number CCC-16346
Competency Card Number _____
NOTARY STAMP/SEAL

Cindy Edge
Notary Signature



Cindy Edge
Commission # DD308375
Expires July 20, 2008
Bonded Troy Fain - Insurance, Inc. 800-385-7019

NOTICE OF COMMENCEMENT

State of FLORIDA
County of COLUMBIA

Inst: 2007001054 Date: 01/16/2007 Time: 11:33
17 DC, P. Dewitt Cason, Columbia County B: 1107 P: 2500

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.

1. Description of property: BEG INTERS OF S LINE OF NE 1/4 OF NW 1/4 W R/W US 41
RUN W 518.55 FT.
2. General description of improvement: REROOF
3. Owner information:
 - a. Name & Address: CLINTON F DICK JR.
4458 S. US 441 - LAKE CITY, FL 32025
 - b. Interest In Property: 100%
 - c. Name & Address of fee simple titleholder (other than owner):

4. Contractor's Name & Address: ONEAL ROOFING CO.
PO Box 2166 - LAKE CITY, FL 32056
 - a. Phone number: 752-7578
 - b. Fax number: 755-0240
5. Surety Information:
 - a. Name & Address: _____
 - b. Phone number: _____
 - c. Fax number: _____
 - d. Amount of Bond: \$ _____
6. Lender's Name & Address: _____
 - a. Phone number: _____
 - b. Fax number: _____
7. Person within the State of Florida designated by owner upon whom notices or other documents may be served as provided by 713.13 (1) (a), 7 Florida Statutes:
Name & Address: _____
 - a. Phone number: _____
 - b. Fax number: _____
8. In addition to himself, owner designates _____ of _____
_____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.
9. Expiration date of Notice of Commencement (the expiration date is one (1) year from the date of recording unless a different date is specified): _____

(signature of owner)

Clinton F. Dick Jr.

Sworn to and subscribed before me
this 12 day of JAN., 192007.

Notary

Kristine Sistrunk

Known Personally/ I.D. Shown _____

My commission expires: May 29, 2007



Kristine Sistrunk
My Commission DD217160
Expires May 29, 2007

Columbia County Property Appraiser

DB Last Updated: 12/29/2006

Parcel: 20-4S-17-08584-001

2007 Proposed Values

Tax Record

Property Card

Interactive GIS Map

Print

Owner & Property Info

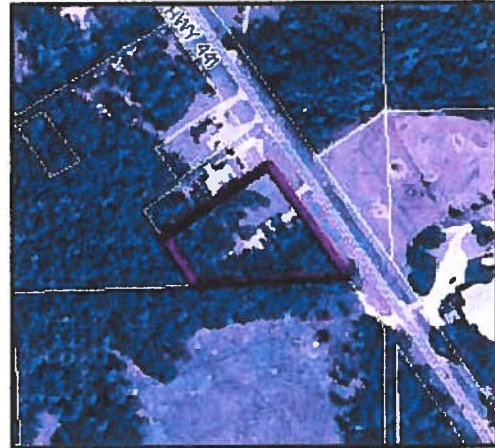
<< Prev

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Owner's Name	DICKS CLINTON F JR &		
Site Address			
Mailing Address	N TERRY DICKS 4458 S U S HWY 441 LAKE CITY, FL 32025		
Use Desc. (code)	OFFICE BUI (001700)		
Neighborhood	20417.00	Tax District	2
UD Codes	MKTA02	Market Area	02
Total Land Area	3.860 ACRES		
Description	BEG INTERS OF S LINE OF NE1/4 OF NE1/4 & W R/W US-41, RUN W 518.55 FT, NW 245.60 FT, NE 440 FT TO RD, SE 520 FT TO POB. ORB 431-799, 651-623, 786-885, 814-260,		

GIS Aerial



Property & Assessment Values

Mkt Land Value	cnt: (1)	\$77,200.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (1)	\$113,642.00
XFOB Value	cnt: (1)	\$2,500.00
Total Appraised Value		\$193,342.00

Just Value	\$193,342.00
Class Value	\$0.00
Assessed Value	\$193,342.00
Exempt Value	\$0.00
Total Taxable Value	\$193,342.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale Vlmp	Sale Qual	Sale RCode	Sale Price
11/22/1995	814/260	WD	I	Q		\$135,000.00
2/16/1994	786/886	WD	I	U	02	\$0.00
11/1/1986	607/495	WD	I	U	01	\$88,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	OFFICE LOW (004900)	1980	Common BRK (19)	3904	4114	\$113,642.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0260	PAVEMENT-A	0	\$2,500.00	1.000	0 x 0 x 0	(.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
001700	1STORY OFF (MKT)	3.860 AC	1.00/1.00/1.00/1.00	\$20,000.00	\$77,200.00

Columbia County Property Appraiser

DB Last Updated: 12/29/2006

1/11/2007

(386) 752-7578
FAX (386) 755-0240

TO: TDT INC.
4458 S. US 441
LAKE CITY FL. 32025

PHONE	DATE
386-752-1093	12/29/2006
JOB NAME / LOCATION	
TDT OFFICE, LAKE CITY, FLORIDA	
JOB NUMBER	JOB PHONE

We hereby submit specifications and estimates for:

1. REMOVE EXISTING SHINGLE ROOF AND ASSOCIATED ITEMS.
2. INSTALL NEW 30 LB. FELT, EAVESDRIP, VALLEY METAL, PIPE FLASHINGS AND 30 YEAR ARCHITECTURAL ELK FIBERGLASS SHINGLES.
3. INSTALL 7 EACH NEW 4 FT. OFF RIDGE VENTS.
4. INSTALL APPROX. 25 LF. OF GUTTER WITH 2 DOWNSPOUTS AT AREA OVER SIDE ENTRANCE.

PRICE FOR ABOVE WORK - \$ 14,199.50.

REPLACE ALUMINUM FASCIA AND RETURNS WITH WHITE ALUMINUM METAL. - \$ 2,325.00

- N S: 1. ANY BAD WOOD REPLACED AND OR WORK OTHER THAN LISTED ABOVE SHALL BE EXTRA.
2. ROOF INSTALLATION SHALL BE GUARANTEED FIVE YEARS FROM DATE OF COMPLETION.
3. IF ACCEPTED, PLEASE SIGN AND RETURN ONE COPY.

We Propose hereby to furnish material and labor — complete in accordance with the above specifications, for the sum of:

dollars (\$ See Above).

Payment to be made as follows:

UPON COMPLETION

All material is guaranteed to be as specified. All work to be completed in a professional manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado, and other necessary insurance. Our workers are fully covered by Worker's Compensation insurance.

Authorized
Signature

John W. O'Neil

Note: This proposal may be
withdrawn by us if not accepted within

30 days.

Acceptance of Proposal — The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Signature _____

Signature _____

Date of Acceptance: _____