

Columbia County Building Permit Application

For Office Use Only Application # 1204-19 Date Received 4-9-12 By LH Permit # 30093
 Zoning Official BLK Date 17 April 2012 Flood Zone X Land Use A-3 Zoning A-3
 FEMA Map # N/A Elevation N/A MFE 1/2 inch River N/A Plans Examiner J.C. Date 4-13-12
 Comments _____
☒ NOC ☒ EH ☒ Deed or PA ☒ Site Plan ☒ State Road Info ☒ Well letter ☒ 911 Sheet ☒ Parent Parcel # _____
☐ Dev Permit # N/A ☐ In Floodway ☒ Letter of Auth. from Contractor ☒ F W Comp. letter
 IMPACT FEES: EMS _____ Fire _____ Corr _____ ☒ Sub VF Form See List
 Road/Code _____ School _____ = TOTAL (Suspended) ☐ Ellisville Water ☒ App Fee Paid

Septic Permit No. 12-0190-E Fax 386-719-6708
 Name Authorized Person Signing Permit Blake N. Lunde II Phone 386-754-5810
 Address 3101 W. US Hwy 90 Ste 102 L.C. FL 32055
 Owners Name Kenneth & Frances Burkes Phone 386-961-8109
 911 Address 5822 NW Falling Creek Rd White Springs, FL 32096
 Contractors Name Blake N. Lunde II Phone 386-754-5810
 Address 3101 W US Hwy 90 STE 102, LC, FL 32055
 Fee Simple Owner Name & Address _____
 Bonding Co. Name & Address N/A
 Architect/Engineer Name & Address MARR Disoway P Box 868 L.C. FL 32056
 Mortgage Lenders Name & Address _____

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress Energy

Property ID Number 12-28-16-01594-000 Estimated Cost of Construction 85,000
 Subdivision Name N/A Lot _____ Block _____ Unit _____ Phase _____
 Driving Directions 41 N to falling Creek Rd. T-R Head North Across Lassie Black 1 mile property on Left.

Number of Existing Dwellings on Property 0
 Construction of SFD, utility Total Acreage 10.01 Lot Size 10.01
 Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 16'
 Actual Distance of Structure from Property Lines - Front 310 Side 50 Side 203' Rear 1102'
 Number of Stories 1 Heated Floor Area 1400 Total Floor Area 1400 Roof Pitch 5/12

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

OK 8643

Spoke to Blake on 4-17-12

\$439.00

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1204-19 CONTRACTOR Blake Lunde PHONE (352) 754-581
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County 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 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 309	Print Name <u>Matt Burns Electric</u> License #: <u>ER 13013004</u>	Signature <u>[Signature]</u> Phone #: <u>386-365-3688</u>	ok
MECHANICAL/ A/C #138	Print Name <u>Lamar Boozer</u> License #: <u>RA0035027</u>	Signature <u>[Signature]</u> Phone #: <u>754-6700</u>	ok
PLUMBING/ GAS 298	Print Name <u>HomeTown Plumbing</u> License #: <u>RF 11067418</u>	Signature <u>[Signature]</u> Phone #: <u>386-557-6149</u>	ok
ROOFING 187	Print Name <u>Mac Johnson Roofing</u> License #: <u>RC 0001384</u>	Signature <u>[Signature]</u> Phone #: <u>352-472-6007</u>	ok
SHEET METAL	Print Name License #:	Signature Phone #:	
FIRE SYSTEM/ SPRINKLER	Print Name License #:	Signature Phone #:	
SOLAR	Print Name License #:	Signature Phone #:	

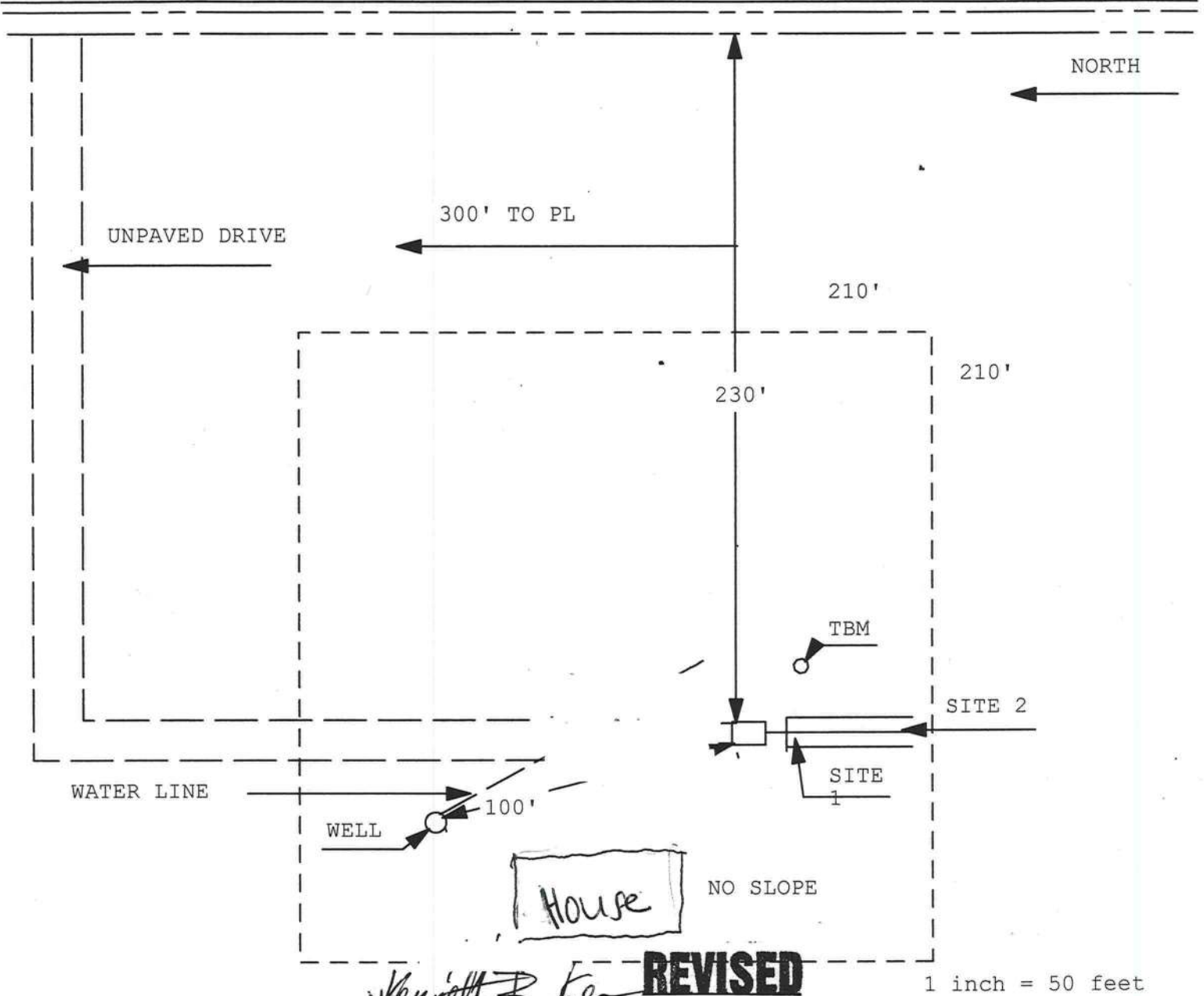
Specialty License	License Number	Sub-Contractor Printed Name	Sub-Contractor Signature	
MASON	<u>000046</u>	<u>[Signature]</u>	<u>[Signature]</u>	ok
CONCRETE FINISHER	<u>000063</u>	<u>Snyder Concrete</u>	<u>[Signature]</u>	ok
FRAMING	<u>177</u>	<u>Mitchell's Framing</u>	<u>[Signature]</u>	ok
INSULATION 498	<u>CBC 1253408</u>	<u>Blake Const. Co.</u>	<u>[Signature]</u>	
STUCCO	<u>N/A</u>			
DRYWALL	<u>000627</u>	<u>Jackson Drywall</u>	<u>[Signature]</u>	ok
PLASTER	<u>N/A</u>			
CABINET INSTALLER	<u>CBC 1253408</u>	<u>Blake Const Co.</u>	<u>[Signature]</u>	ok
PAINTING	<u>000104</u>	<u>Leo's Painting</u>	<u>[Signature]</u>	ok
ACOUSTICAL CEILING	<u>N/A</u>			
GLASS	<u>N/A</u>			
CERAMIC TILE	<u>CBC 1253408</u>	<u>Blake Const Co.</u>	<u>[Signature]</u>	ok
FLOOR COVERING	<u>CBC 1253408</u>	<u>Blake Const Co.</u>	<u>[Signature]</u>	ok
ALUM/VINYL SIDING	<u>CBC 1253408</u>	<u>Blake Const Co.</u>	<u>[Signature]</u>	
CARPORT	000218	[Signature]	[Signature]	
METAL BLDG ERECTOR				

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.

City of Columbia, South Carolina Building Department

Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan
Permit Application Number: 12-0190-E

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Kenneth Burkes Date 3-30-12
Plan Approved X Not Approved _____ Date _____

By Salli Ford Env Health
Director
4/1/12

Note: _____

Columbia CHD

PHU

(Kenneth Burkes for Blake Lynde)
permit

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787
PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for assigning and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Service Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County.

DATE REQUESTED: 5/12/2010 DATE ISSUED: 5/13/2010

ENHANCED 9-1-1 ADDRESS:

5822 NW FALLING CREEK RD

WHITE SPRINGS FL 32096

PROPERTY APPRAISER PARCEL NUMBER:

12-2S-16-01594-000

Remarks:

Address Issued By: _____
Columbia County 9-1-1 Addressing / GIS Department

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION INFORMATION BE FOUND TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.

1730

Returned 4-10-12

Columbia County Building Permit Application

☒ Application fee

For Office Use Only Application # 1008-26 Date Received 8/16/10 By UH Permit # _____
Zoning Official BLK Date 15.10.10 Flood Zone X Land Use A-3 Zoning A-3
FEMA Map # N/A Elevation N/A MFE 1' behind River N/A Plans Examiner J.C. Date 8-22-10

Comments _____

☐ NOC ☐ EH ☒ Deed or PA ☒ Site Plan ☐ State Road Info ☐ Parent Parcel #
☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter

IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____
School _____ = TOTAL N/A Suspended ☒ VF form by owner

Septic Permit No. 10-0343

Fax _____

Name Authorized Person Signing Permit Kenneth B. Burkes Phone (386) 961-8109

Address 5822 NW Falling Creek Rd White Springs, FL 32096

Owners Name Kenneth B. and Frances Burkes Phone _____

911 Address 5822 NW Falling Creek Rd White Springs, FL 32096

Contractors Name owner builder Phone 386 (91) 8109

Address 5822 NW Falling Creek Rd white Springs, FL 32096

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address S. Pat Haygood / Marty Humphries

Mortgage Lenders Name & Address _____

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress Energy

Property ID Number 12-25-16-01594-000 Estimated Cost of Construction \$200,000.

Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____

Driving Directions take Hwy 41 North from L.C. to falling Creek Rd

Turn right go 5 1/2 to 6 miles. Site located on left side of road.

Number of Existing Dwellings on Property 0

Construction of NEW HOME Total Acreage _____ Lot Size 10 AC

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height _____

Actual Distance of Structure from Property Lines - Front 500' Left Side 118' Right Side 119' Rear 927'

Number of Stories 1 Heated Floor Area 1664 Total Floor Area 3264 Roof Pitch 7/12

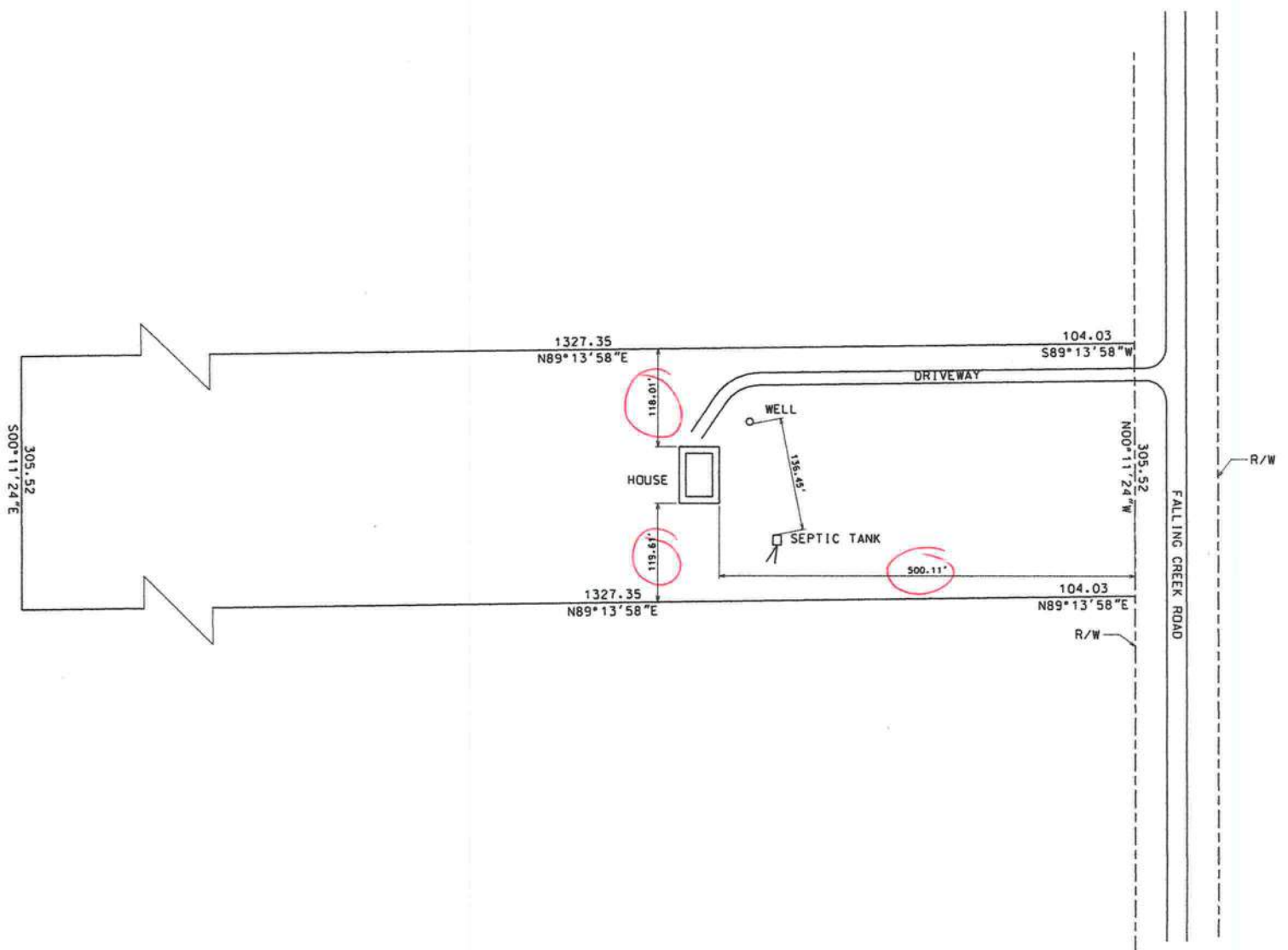
Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction.

Spoke to Mr. Burkes
on 10/15/10

EXTENDED
2010

KENNETH B. & FRANCES BURKES
5822 NW FALLING CREEK ROAD
LAKE CITY FLORIDA 32096

TAKE HWY 41 NORTH FROM LAKE CITY TO FALLING CREEK ROAD,
TURN RIGHT GO 5½ TO 6 MILES. SITE LOCATED ON LEFT SIDE OF ROAD.





1008-26

1608-26 8-16-10

STATE OF FLORIDA
COUNTY OF COLUMBIA

AFFIDAVIT

This is to certify that I, (We), Blue Sky Timber-Land^{Co.}, as the
seller, by an **Agreement for Deed**, of the below described property:

Tax Parcel No. P/O R 01594-000

Subdivision (Name, lot, Block, Phase) Parcel B Falling Creek 10 Acres

Give my permission for Kenneth & Frances Burkes to place a
(Mobile Home / Travel Trailer / Single Family Home)

I (We) understand that this could result in an assessment for solid waste and fire
protection services levied on this property.

[Signature]
(1) Seller Signature

(2) Seller Signature

Sworn to and subscribed before me this 15 day of October, 2010. This

(These) person (s) are personally known to me or produced ID _____
(Type)

[Signature]
Notary Public Signature

Holly C Hanover
Notary Printed Name

State of Florida

My commission expires: 5/18/14



Columbia County Property Appraiser

DB Last Updated: 3/12/2012

2011 Tax Year

Parcel: 12-2S-16-01594-000

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

Owner & Property Info

Owner's Name	BLUE SKY TIMBER-LAND CO		
Mailing Address	P O BOX 3176 LAKE CITY, FL 32056-3176		
Site Address	---		
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	12216
Land Area	10.010 ACRES	Market Area	03
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
SW1/4 OF SE1/4. EX 12.67 AC DESC IN PART OF LEGL IN ORB 1148-1100 & EX 9.33 AC DESC ORB 1155-808. ORB 671-457, PROB#05-118 1052-2661 THRU 2677, PROB 1139-535 & PRD 1139 -2533 & EX 9.61 AC AS DESC IN ORB 1206-486			

<< Prev Search Result: 3 of 7 Next >>

**Property & Assessment Values**

2011 Certified Values		
Mkt Land Value	cnt: (0)	\$55,055.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$55,055.00
Just Value		\$55,055.00
Class Value		\$0.00
Assessed Value		\$55,055.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$55,055 Other: \$55,055 Schl: \$55,055	

2012 Working Values**NOTE:**

2012 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**[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
12/28/2007	1139/2533	PR	V	Q		\$657,700.00

Building Characteristics



Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Extra Features & Out Buildings

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

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000000	VAC RES (MKT)	10.01 AC	1.00/1.00/1.00/1.00	\$4,950.00	\$49,549.00

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS					
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[No Events](#) [No Name History](#)

Detail by Entity Name

Florida Profit Corporation
BLUE SKY TIMBER-LAND CO.

Filing Information

Document Number P05000069392
FEI/EIN Number 202787327
Date Filed 05/09/2005
State FL
Status ACTIVE

Principal Address

2753 E US HWY 90
LAKE CITY FL 32055 US
Changed 02/06/2009

Mailing Address

P.O. BOX 3176
LAKE CITY FL 32056 US
Changed 02/06/2009

Registered Agent Name & Address

BULLARD, AUDREY S
2753 E US H'WAY 90
LAKE CITY FL 32055 US

Officer/Director Detail

Name & Address
Title D
DENUNE, HARRY C P.O BOX 3176 LAKE CITY FL 32056
Title DPST
BULLARD, AUDREY S P.O. BOX 1733 LAKE CITY FL 32056
Title V/D
BULLARD, CHRIS A P.O. BOX 1432 LAKE CITY FL 32056

Annual Reports

Report Year Filed Date

2010	02/08/2010
2011	03/08/2011
2012	02/20/2012

Document Images

02/20/2012 -- ANNUAL REPORT	View image in PDF format
03/08/2011 -- ANNUAL REPORT	View image in PDF format
02/08/2010 -- ANNUAL REPORT	View image in PDF format
02/06/2009 -- ANNUAL REPORT	View image in PDF format
03/19/2008 -- ANNUAL REPORT	View image in PDF format
02/13/2007 -- ANNUAL REPORT	View image in PDF format
02/08/2006 -- ANNUAL REPORT	View image in PDF format
05/09/2005 -- Domestic Profit	View image in PDF format

Note: This is not official record. See documents if question or conflict.

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State of Florida, Department of State



1008-26

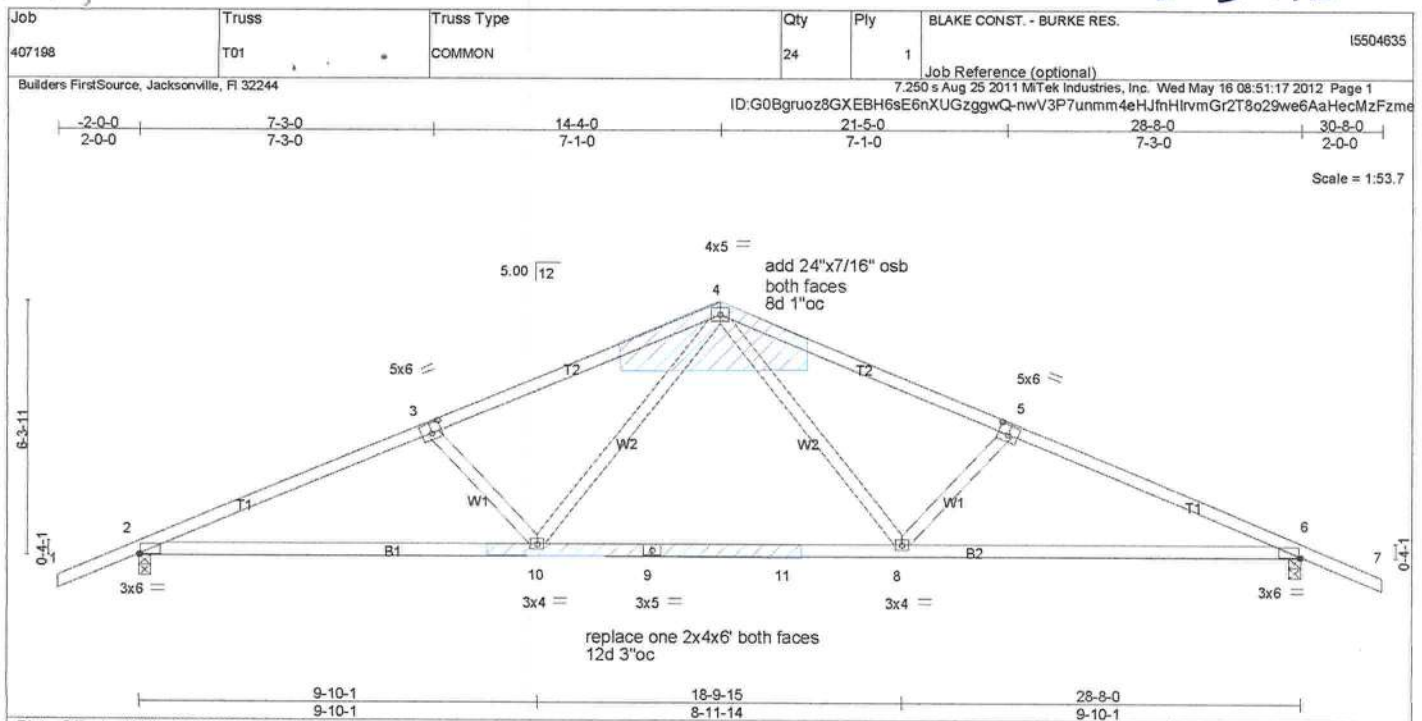


Plate Offsets (X, Y):		[2:0-0.6,0-0.2], [3:0-3.0,0-3.0], [5:0-3.0,0-3.0], [6:0-0.6,0-0.2]		8-11-14		9-10-1	
LOADING (psf)		SPACING 2-0-0		CSI	DEFL in (loc) l/defl L/d	PLATES	GRIP
TCLL 20.0		Plates Increase 1.25		TC 0.37	Vert(LL) -0.32 8-10 >999 240	MT20	244/190
TCDL 7.0		Lumber Increase 1.25		BC 0.60	Vert(TL) -0.44 6-8 >782 180		
BCLL 0.0 *		Rep Stress Incr YES		WB 0.27	Horz(TL) 0.08 6 n/a n/a		
BCDL 5.0		Code FBC2007/TP12002		(Matrix)		Weight: 129 lb	FT = 20%

LUMBER

TOP CHORD	2 X 4 SYP No.2
BOT CHORD	2 X 4 SYP No.2
WEBS	2 X 4 SYP No.3

BRACING

TOP CHORD
BOT CHORD

Structural wood sheathing directly applied or 4-1-13 oc purlins.
Rigid ceiling directly applied or 7-1-11 oc bracing.

MiTek recommends that Stabilizers and required cross bracing be installed during truss erection, in accordance with Stabilizer Installation guide.

REACTIONS

(lb/size) 2=1088/0-3-8, 6=1088/0-3-8
Max Horz 2=100(LC 6)
Max Uplift 2=-296(LC 6), 6=-296(LC 7)

FORCES

FORCES (lb) - Max. Comp./Max. Ten. - All forces 250 (lb) or less except when shown.
TOP CHORD 2-3=-2015/1015, 3-4=-1743/923, 4-5=-1742/923, 5-6=-2013/1015
BOT CHORD 2-10=-780/1788, 9-10=-383/1186, 9-11=-383/1186, 8-11=-383/1186, 6-8=-780/1787
WEBS 4-8=-264/592, 5-8=-389/664, 4-10=-264/594, 3-10=-399/361

NOTES (9-11)

- 1) Unbalanced roof live loads have been considered for this design.
- 2) Wind: ASCE 7-05; 110mph (3-second gust); TCDFL=4.2psf; BCDL=3.0psf; h=18ft; Cat. II; Exp B; enclosed; MWFRS (low-rise) and C-C Exterior(2) zone; C-C for members and forces & MWFRS for reactions shown; Lumber DOL=1.60 plate grip DOL=1.60
- 3) This truss has been designed for a 10.0 psf bottom chord live load nonconcurrent with any other live loads.
- 4) * This truss has been designed for a live load of 20.0psf on the bottom chord in all areas where a rectangle 3-6-0 tall by 2-0-0 wide will fit between the bottom chord and any other members, with BCDL = 5.0psf.
- 5) All bearings are assumed to be SYP No.2
- 6) Provide mechanical connection (by others) of truss to bearing plate capable of withstanding 296 lb uplift at joint 2 and 296 lb uplift at joint 6.
- 7) "Semi-rigid pitchbreaks including heels" Member end fixity model was used in the analysis and design of this truss.
- 8) Warning: Additional permanent and stability bracing for truss system (not part of this component design) is always required.
- 9) This manufactured product is designed as an individual building component. The suitability and use of this component for any particular building is the responsibility of the building designer per ANSI TPI 1 as referenced by the building code.
- 10) For special connections with reactions or uplifts less than 300 lbs. Use typical toe-nail connection (refer to BFS detail package)
- 11) Truss Design Engineer: Julius Lee, PE: Florida P.E. License No. 34869: Address: 1109 Coastal Bay Blvd. Boynton Beach, FL 33435

LOAD CASE(S) Standard



May 16, 2012



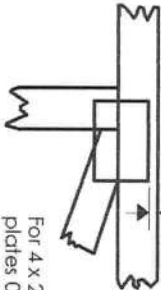
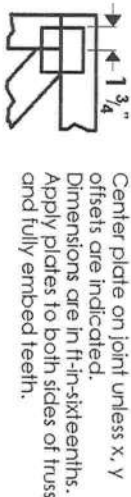
WARNING - Verify design parameters and READ NOTES ON THIS AND INCLUDED MITEK REFERENCE PAGE MH-7473 BEFORE USE.

Design valid for use only with Mitek connectors. This design is based only upon parameters shown, and is for an individual building component. Applicability of design parameters and proper incorporation of component is responsibility of building designer - not truss designer. Bracing shown is for lateral support of individual web members only. Additional temporary bracing to insure stability during construction is the responsibility of the erector. Additional permanent bracing of the overall structure is the responsibility of the building designer. For general guidance regarding fabrication, quality control, storage, delivery, erection and bracing, consult **ANSI/TPI Quality Criteria, D38-89 and BCS1 Building Component Safety Information** available from Truss Plate Institute, 583 D'Onofrio Drive, Madison, WI 53719.

Julius Lee PE.
1109 Coastal Bay
Boynton Beach, FL 33435

Symbols

PLATE LOCATION AND ORIENTATION



*Plate location details available in Mitek 20/20 software or upon request.

PLATE SIZE

4 X 4

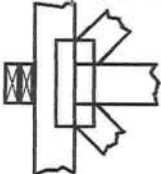
The first dimension is the plate width measured perpendicular to slots. Second dimension is the length parallel to slots.

LATERAL BRACING LOCATION



Indicated by symbol shown and/or by text in the bracing section of the output. Use L, I or Eliminator bracing if indicated.

BEARING

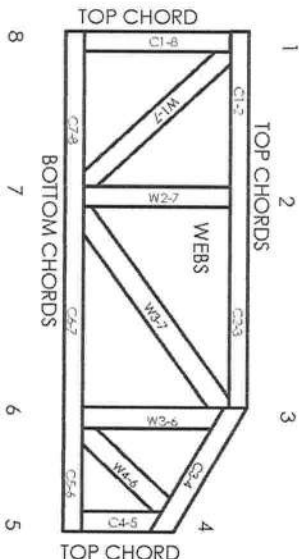


Indicates location where bearings (supports) occur. Icons vary but reaction section indicates joint number where bearings occur.

Industry Standards:

ANSI/TPI1: National Design Specification for Metal Plate Connected Wood Truss Construction.
DSB-89: Design Standard for Bracing.
BCS11: Building Component Safety Information, Guide to Good Practice for Handling, Installing & Bracing of Metal Plate Connected Wood Trusses.

Numbering System



JOINTS ARE GENERALLY NUMBERED/LETTERED CLOCKWISE AROUND THE TRUSS STARTING AT THE JOINT FARTHEST TO THE LEFT.

CHORDS AND WEBS ARE IDENTIFIED BY END JOINT NUMBERS/LETTERS.

PRODUCT CODE APPROVALS

ICC-ES Reports:

ESR-1311, ESR-1352, ER-5243, 9604B, 9730, 95-43, 96-31, 9667A
NER-487, NER-561
95110, 84-32, 96-67, ER-3907, 9432A

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Julius Lee PE
1109 Coastal Bay ,
Boynton Beach ,FL 33435

General Safety Notes

Failure to Follow Could Cause Property Damage or Personal Injury

1. Additional stability bracing for truss system, e.g. diagonal or X-bracing, is always required. See BCS11.
2. Truss bracing must be designed by an engineer. For wide truss spacing, individual lateral braces themselves may require bracing, or alternative L, I, or Eliminator bracing should be considered.
3. Never exceed the design loading shown and never stock materials on inadequately braced trusses.
4. Provide copies of this truss design to the building designer, erection supervisor, property owner and all other interested parties.
5. Cut members to bear tightly against each other.
6. Place plates on each face of truss at each joint and embed fully. Knots and wane at joint locations are regulated by ANSI/TPI 1.
7. Design assumes trusses will be suitably protected from the environment in accord with ANSI/TPI 1.
8. Unless otherwise noted, moisture content of lumber shall not exceed 19% at time of fabrication.
9. Unless expressly noted, this design is not applicable for use with fire retardant, preservative treated, or green lumber.
10. Camber is a non-structural consideration and is the responsibility of truss fabricator. General practice is to camber for dead load deflection.
11. Plate type, size, orientation and location dimensions indicated are minimum plating requirements.
12. Lumber used shall be of the species and size, and in all respects, equal to or better than that specified.
13. Top chords must be sheathed or purlins provided at spacing indicated on design.
14. Bottom chords require lateral bracing at 10 ft. spacing, or less, if no ceiling is installed, unless otherwise noted.
15. Connections not shown are the responsibility of others.
16. Do not cut or alter truss member or plate without prior approval of an engineer.
17. Install and load vertically unless indicated otherwise.
18. Use of green or treated lumber may pose unacceptable environmental, health or performance risks. Consult with project engineer before use.
19. Review all portions of this design (front, back, words and pictures) before use. Reviewing pictures alone is not sufficient.
20. Design assumes manufacture in accordance with ANSI/TPI 1 Quality Criteria.

THIS INSTRUMENT PREPARED BY
AND RETURN TO:
NORTH CENTRAL FLORIDA TITLE, LLC
343 NW COLE TERRACE
SUITE 101
LAKE CITY, FLORIDA 32055

Parcel I.D. #: 01594-000
Permit No.

Post: 201212005457 Date: 4/9/2012 Time: 3:39 PM
DC, P. DeWitt Cason, Columbia County Page 1 of 2 B: 1232 P: 2201

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

NOTICE OF COMMENCEMENT

STATE OF FLORIDA
COUNTY OF COLUMBIA

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. This Notice shall be void and of no force and effect if construction is not commenced within ninety (90) days after recordation.

1. Description of property: (Legal description of property, and street address if available)

5822 NW FALLING CREEK ROAD, WHITE SPRINGS, FLORIDA 32096

TRACT 1

A PART OF LANDS FORMERLY DESCRIBED IN OFFICIAL RECORD BOOK 1139, PAGES 2533-2535 OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS: COMMENCE AT THE NW CORNER OF S ½ OF S ½ OF SE ¼ OF SECTION 12, TOWNSHIP 2 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA; THENCE RUN N 00°11'24" W ALONG THE WEST LINE OF SE ¼ OF SAID SECTION 12, A DISTANCE OF 52.74 FEET; THENCE CONTINUE N 00°11'24" W ALONG THE WEST LINE OF SAID SE ¼ A DISTANCE OF 303.65 FEET; THENCE N 89°15'03" E, A DISTANCE OF 715.79 FEET TO THE POINT OF BEGINNING; THENCE N 89°15'03" E, A DISTANCE OF 715.79 FEET TO THE WEST RIGHT-OF-WAY OF NW FALLING CREEK ROAD (A COUNTY MAINTAINED PAVED ROAD) AKA OLD RIVER ROAD; THENCE S 01°43'48" E ALONG SAID WEST RIGHT-OF-WAY LINE A DISTANCE OF 303.78 FEET; THENCE S 89°15'17" W A DISTANCE OF 719.87 FEET; THENCE N 00°57'45" W A DISTANCE OF 303.69 FEET TO THE POINT OF BEGINNING.

SUBJECT TO AN EASEMENT FOR INGRESS, EGRESS AND UTILITY PURPOSES OVER AND ACROSS THE NORTHERLY 30 FEET THEREOF.

2. General description of improvement: **CONSTRUCTION OF A SINGLE FAMILY DWELLING**
3. Owner information:
- a. Name and address:
KENNETH B. BURKES and FRANCES T. BURKES
5822 NW FALLING CREEK ROAD, WHITE SPRINGS,
FLORIDA 32096
 - b. Interest in property: **Fee Simple**
 - c. Name and Address of Fee Simple Titleholder (if other than owner):
4. Contractor: (Name and Address)
BLAKE CONSTRUCTION COMPANY OF NORTH FLORIDA, INC.
3101 W US HWY. 90, SUITE 102, LAKE CITY, FLORIDA 32055
Telephone Number: 386-754-5810
5. Surety (if any):
- a. Name and Address:
Telephone Number: _____
 - b. Amount of Bond \$ _____
6. Lender: (Name and Address)
USDA RURAL DEVELOPMENT
971 WEST DUVAL STREET, SUITE 190, LAKE CITY, FL 32055
Telephone Number: 719-5590
7. Persons within the State of Florida designated by Owner upon whom notice or other documents may be served as provided by Section 713.13(1)(a)(7), Florida Statutes: (Name and Address)
N/A
8. In addition to himself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes: (Name and Address)
USDA RURAL DEVELOPMENT
971 WEST DUVAL STREET, SUITE 190, LAKE CITY, FL 32055
Telephone Number: 719-5590

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

Signature of Owner(s) or Owner's Authorized Officer/Director/Partner/Manager:

Kenneth B. Burkes {SEAL}
KENNETH B. BURKES

Frances T. Burkes {SEAL}
FRANCES T. BURKES

The foregoing instrument was acknowledged before me this 5th day of April, 2012, by KENNETH B. BURKES and FRANCES T. BURKES, who are personally known to me or who have produced *Driver's License* as identification.

Patricia H. Lang
Notary Public
My Commission Expires: 12-14-14

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Kenneth B. Burkes
Signature of Natural Person Signing Above



10.00
266.00
38,000.00

This Instrument Prepared by & return to:

Name: **TRISH LANG, an employee of
NORTH CENTRAL FLORIDA TITLE,
LLC**
Address: **343 NW COLE TERRACE, SUITE 101
LAKE CITY, FLORIDA 32055
File No. 12Y-03017TL**

Parcel I.D. #: **01594-000**

I HEREBY CERTIFY THIS TO
BE A TRUE AND EXACT
COPY OF THE ORIGINAL

Regina Simpkins

Inst:201212005455 Date:4/9/2012 Time:3:39 PM
Doc Stamp-Deed:266.00
DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1232 P:2193

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the **5th** day of **April**, A.D. 2012, by **BLUE SKY TIMBER-LAND CO.**, hereinafter called the grantor, to **KENNETH B. BURKES and FRANCES T. BURKES, HIS WIFE**, whose post office address is **5822 NW FALLING CREEK ROAD, WHITE SPRINGS, FLORIDA 32096**, hereinafter called the grantees:

(Wherever used herein the terms "grantor" and "grantees" include all the parties to this instrument, singular and plural, the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth: That the grantor, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, does hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the grantees all that certain land situate in **Columbia County, State of Florida**, viz:

TRACT 1

A PART OF LANDS FORMERLY DESCRIBED IN OFFICIAL RECORD BOOK 1139, PAGES 2533-2535 OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS: COMMENCE AT THE NW CORNER OF S ½ OF S ½ OF SE ¼ OF SECTION 12, TOWNSHIP 2 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA; THENCE RUN N 00°11'24" W ALONG THE WEST LINE OF SE ¼ OF SAID SECTION 12, A DISTANCE OF 52.74 FEET; THENCE CONTINUE N 00°11'24" W ALONG THE WEST LINE OF SAID SE ¼, A DISTANCE OF 303.65 FEET; THENCE N 89°15'03" E, A DISTANCE OF 715.79 FEET TO THE POINT OF BEGINNING; THENCE N 89°15'03" E, A DISTANCE OF 715.79 FEET TO THE WEST RIGHT-OF-WAY OF NW FALLING CREEK ROAD (A COUNTY MAINTAINED PAVED ROAD) AKA OLD RIVER ROAD; THENCE S 01°43'48" E ALONG SAID WEST RIGHT-OF-WAY LINE A DISTANCE OF 303.78 FEET; THENCE S 89°15'17" W A DISTANCE OF 719.87 FEET; THENCE N 00°57'45" W A DISTANCE OF 303.69 FEET TO THE POINT OF BEGINNING.

SUBJECT TO AN EASEMENT FOR INGRESS, EGRESS AND UTILITY PURPOSES OVER AND ACROSS THE NORTHERLY 30 FEET THEREOF.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold the same in fee simple forever.

And the grantor hereby covenants with said grantees that he is lawfully seized of said land in fee simple; that he has good right and lawful authority to sell and convey said land, and hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever, and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2012.

In Witness Whereof, the said grantor has signed and sealed these presents, the day and year first above written.

Signed, sealed and delivered in the presence of:

Patricia Lang
Witness Signature
PATRICIA LANG

Printed Name .

Regina Simpkins
Witness Signature
Regina Simpkins

Printed Name

Audrey S. Bullard L.S.
BLUE SKY TIMBER-LAND CO.
BY: AUDREY S. BULLARD-PRESIDENT
Address:
P.O. BOX 3176, LAKE CITY, FLORIDA 32056

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this **5th** day of **April**, 2012, by **AUDREY S. BULLARD, PRESIDENT OF BLUE SKY TIMBER-LAND CO.**, who is known to me or who has produced *Driver's License* as identification.



Patricia Lang
Notary Public
My commission expires 12-14-14