

DATE 10/01/2008

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000027389

APPLICANT ADAM PAGE PHONE 752-7578
 ADDRESS PO BOX 2166 LAKE CITY FL 32056
 OWNER DONNA CASON PHONE _____
 ADDRESS 282 SE MOJAVE WAY LAKE CITY FL 32025
 CONTRACTOR ONEAL ROOFIG CO PHONE 752-7578
 LOCATION OF PROPERTY 90 EAST, R OLD COUNTRY CLUB, TO EASTWOOD S/D, R ANASTIA RD
L MOJAVO, 7TH ON RIGHT

TYPE DEVELOPMENT RE-ROOF ESTIMATED COST OF CONSTRUCTION 10600.00
 HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT _____ STORIES _____
 FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____
 LAND USE & ZONING _____ MAX. HEIGHT 35
 Minimum Set Back Requirments: STREET-FRONT _____ REAR _____ SIDE _____
 NO. EX.D.U. 1 FLOOD ZONE NA DEVELOPMENT PERMIT NO. _____

PARCEL ID 16-4S-17-08382-284 SUBDIVISION WOODLAND CENTRAL
 LOT 14 BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES _____

_____ CCC016346 _____
 Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
 EXISTING X08-327 LH LH N
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: NOC ON FILE

 _____ Check # or Cash 20435

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 \$ 55.00 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** 55.00
 INSPECTORS OFFICE Z.H. 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."

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 TO BE IN ACTIVE PROGRESS WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

Columbia County Building Permit Application

For Office Use Only Application # 0810-03 Date Received 10/1/08 By UH Permit # 27389
 Zoning Official X08-327 Date _____ Flood Zone _____ Land Use _____ Zoning _____
 FEMA Map # _____ Elevation _____ MFE _____ River _____ Plans Examiner _____ Date _____
 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 _____

Septic Permit No. X08-327 Fax _____
 Name Authorized Person Signing Permit ADAM PAGE Phone 752-7578
 Address PO BOX 2166 - LAKE CITY, FL 32056
 Owners Name DONNA CASON Phone _____
 911 Address 282 SE MOJAVE WAY, LAKE CITY, FL 32025
 Contractors Name ONEAL ROOFING CO. Phone _____
 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. - Progress Energy

Property ID Number 16-45-17-08382-284 Estimated Cost of Construction 10,600⁰⁰
 Subdivision Name WOODLAND CENTRAL Lot 14 Block _____ Unit _____ Phase _____
 Driving Directions GO EAST T^(R) ON OLD COUNTRY CLUB - FOLLOW TO EASTWOOD S/D - T^(R) ON ANASTIA RD - FOLLOW TO MOJAVE T^(L) 7th House ON RIGHT.
 Number of Existing Dwellings on Property 1

Construction of Renov. S/D Total Acreage _____ Lot Size _____
 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 _____ Side _____ Side _____ Rear _____
 Number of Stories 1 Heated Floor Area _____ Total Floor Area 2128 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.

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.

FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment

According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects to make other legally required payments, the people who are owed money may look to your property for payment, even if you have paid your contractor in full. This means if a lien is filed against your property, it could be sold against your will to pay for labor, materials or other services which your contractor may have failed to pay.

NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE:

YOU ARE HEREBY NOTIFIED as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes to lot grades that result in ponding of water, or other damage to roadway and other public infrastructure facilities caused by you or your contractor, subcontractors, agents or representatives in the construction and/or improvement of the building and lot for which this permit is issued. No certificate of occupancy will be issued until all corrective work to these public infrastructures and facilities has been corrected.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNERS CERTIFICATION: I 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. I further understand the above written responsibilities in Columbia County for obtaining this Building Permit.

Donna M. Cason
Owners Signature

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

X John W. Smith
Contractor's Signature (Permitee)

Contractor's License Number CC0616346
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 1st day of October 2008.
Personally known or Produced Identification _____

Cindy Edge
State of Florida Notary Signature (For the Contractor)

SEAL:



Columbia County Property Appraiser

DB Last Updated: 8/5/2008

2008 Proposed Values

Tax Record

Property Card

Interactive GIS Map

Print

Parcel: 16-4S-17-08382-284 HX

<< Prev Search Result: 9 of 28 Next >>

Owner & Property Info

Owner's Name	WALDRON DONNA L ETAL		
Site Address	MOJAVE		
Mailing Address	282 SE MOJAVE WAY LAKE CITY, FL 32025		
Use Desc. (code)	SINGLE FAM (000100)		
Neighborhood	16417.05	Tax District	2
UD Codes	MKTA06	Market Area	06
Total Land Area	0.000 ACRES		
Description	LOT 14 WOODLAND CENTRAL S/D. ORB 457-713, 573-503, PROB#05-135 CP GARY RODNEY WALDRON 1057-472 THRU 487.		

GIS Aerial



Property & Assessment Values

Mkt Land Value	cnt: (1)	\$19,500.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (1)	\$65,235.00
XFOB Value	cnt: (5)	\$17,672.00
Total Appraised Value		\$102,407.00

Just Value	\$102,407.00
Class Value	\$0.00
Assessed Value	\$80,777.00
Exempt Value	(code: HX) \$50,000.00
Total Taxable Value	\$30,777.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
11/1/1980	457/713	03	I	Q		\$48,500.00
9/1/1985	573/503	WD	I	Q		\$53,500.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1980	Average (05)	1372	2178	\$65,235.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0190	FPLC PF	0	\$1,600.00	1.000	0 x 0 x 0	(.00)
0280	POOL R/CON	1980	\$7,373.00	512.000	16 x 32 x 0	(.00)
0120	CLFENCE 4	1993	\$300.00	1.000	0 x 0 x 0	(.00)
0282	POOL ENCL	2004	\$8,299.00	1092.000	26 x 42 x 0	(.00)
0260	PAVEMENT-A	2004	\$100.00	1.000	0 x 0 x 0	(.00)

Land Breakdown

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>> Print as PDF <<

LOT 14 WOODLAND CENTRAL S/D. WALDRON DONNA L ETAL 16-4S-17-08382-284 Columbia County 2008 R
 ORB 457-713, 573-503, 282 SE MOJAVE WAY CARD 001 of 001
 PROB#05-135 CP GARY RODNEY LAKE CITY, FL 32025 PRINTED 8/04/2008 13:57 BY JEFF
 WALDRON 1057-472 THRU 487. APPR 6/06/2005 DF

BUSE 000100 SINGLE FAM	AE? Y	1372 HTD AREA	101.800 INDEX	16417.05 WOODLAND	PUSE	000100 SINGLE FAMILY	
MOD 1 SFR	2.00	1795 EFF AREA	51.918 E-RATE	100.000 INDX	STR 16- 4S- 17		
EXW 05 AVERAGE FIXT		93193 RCN		1980 AYB	MKT AREA 06	65,235 BLDG	
% 0000000000 BDRM	3	70.00 %GOOD	65,235 B BLDG VAL	1980 EYB	(PUD1	17,672 XFOB	
RSTR 03 GABLE/HIP RMS		*FIELD CK:				AC	19,500 LAND
RCVR 03 COMP SHNGL UNTS		*LOC: 282 MOJAVE WAY SE				NTCD	0 AG
% N/A C-W%					APPR CD	0 MKAG	
INTW 05 DRYWALL HGHT					CNDO	102,407 JUST	
% N/A PMTR					SUBD	0 CLAS	
FLOR 14 CARPET STYS	1.0				BLK		
10% 08 SHT VINYL ECON					LOT	0 SOHD	
HTTP 04 AIR DUCTED FUNC					MAP#	0 ASSD	
A/C N/A SPCD					HX	0 EXPT	
QUAL 05 05 DEPR 52					TXDT 002	0 COTXBL	
FNDN N/A UD-1	N/A						
SIZE 04 IRREGULAR UD-2	N/A						
CEIL N/A UD-3	N/A						
ARCH N/A UD-4	N/A						
FRME 01 NONE UD-5	N/A						
KTCH 01 01 UD-6	N/A						
WINDO N/A UD-7	N/A						
CLAS N/A UD-8	N/A						
OCC N/A UD-9	N/A						
COND 03 03 %	N/A						
SUB A-AREA % E-AREA		SUB VALUE					
BAS93 1372 100 1372		49863					
FSP93 168 55 92		3343					
FST93 160 55 88		3198					
FGR93 400 55 220		7995					
FOP93 78 30 23		836					
TOTAL 2178 1795 65235							
-----EXTRA FEATURES-----							
AE BN CODE	DESC	LEN	WID	HGHT	QTY QL	YR ADJ	
Y 1 0190	FPLC PF				1	0000 1.00	
Y 0280	POOL R/CON	16	32		1	1980 1.00	
N 0120	CLFENCE 4				1	1993 1.00	
Y 0282	POOL ENCL	26	42		1	2004 1.00	
Y 0260	PAVEMENT-ASP				1	2004 1.00	

-----FIELD CK:-----													
UNITS	UT	PRICE	ADJ	UT	PR	SPCD	%	%GOOD	XFOB	VALUE			
1.000	UT	1600.000			1600.000			100.00		1,600			
512.000	SF	36.000			36.000			40.00		7,373			
1.000	UT	300.000			300.000			100.00		300			
1092.000	SF	9.500			9.500			80.00		8,299			
1.000	UT	100.000			100.000			100.00		100			
-----PERMITS-----													
NUMBER	DESC	AMT	ISSUED										
-----SALE-----													
BOOK	PAGE	DATE								PRICE			
457	713	11/01/1980	Q	I						48500			
GRANTOR													
GRANTEE													
573	503	9/01/1985	Q	I						53500			
GRANTOR													
GRANTEE													
-----ADJUSTMENTS-----													
LAND	DESC	ZONE	ROAD	{UD1	{UD3	FRONT	DEPTH	FIELD CK:					
AE	CODE	TOPO	UTIL	{UD2	{UD4	BACK	DT	ADJUSTMENTS				UNITS	UT
Y	000100	SFR	A-1					1.00	1.00	1.00	1.00	1.000	LT
													19500.000
													19500.00
													19,500



O'NEAL ROOFING COMPANY

P.O. BOX 2166
LAKE CITY, FLORIDA 32056

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

TO: DONNA CASON
282 SE MOJAVE WAY
LAKE CITY FL 32025

PHONE 755-0884	DATE 9/5/2008
JOB NAME / LOCATION TREE DAMAGED ROOF:	
JOB NUMBER	JOB PHONE

We hereby submit specifications and estimates for:

ROOF REPLACEMENT:

1. REMOVE EXISTING ROOFING MATERIAL, ASSOCIATED ITEMS, AND PROPERLY DISPOSE OF ALL DEBRIS.
2. INSTALL NEW PEEL & STICK UNDERLAYMENT, NEW EAVESDRIP METAL, NEW PIPE FLASHINGS, NEW RIDGE VENT, NEW KITCHEN VENT, NEW CHIMNEY FLASHING, NEW SKYLIGHT, AND NEW FIBERGLASS SHINGLES.
3. REPAIR (APPROX. 30 LF) FACIA WOOD.
4. REPAIR (APPROX. 30 LF) SOFFIT WOOD.
5. REPLACE (APPROX. 160 SQ/FT) 1/2" PLYWOOD.

25 YEAR 3-TAB SHINGLES -
30 YEAR ARCHITECTURAL SHINGLES -

PRICE: \$10,237.00
PRICE: \$10,657.00

CEILING REPLACEMENT IN BEDROOM:

1. LABOR AND MATERIAL TO REMOVE DRYWALL CEILING IN BEDROOM, INSTALL NEW R-30 BATTON INSULATION, INSTALL NEW DRYWALL, AND PROVIDE A LIGHT SKIP TROWEL FINISH. PAINT INTERIOR WALLS TO MATCH EXISTING.

PRICE: \$1,826.00

NOTES:

1. ANY BAD WOOD REPLACED OTHER THAN STATED SHALL BE CHARGED COST OF MATERIAL AND LABOR.
2. ROOF SHALL BE GUARANTEED FREE OF DEFECTS AND WATERTIGHT FOR A PERIOD OF FIVE (5) YEARS FROM THE DATE OF COMPLETION.
3. POOL HEATER SOLAR CELLS ARE TO BE REMOVED AND RE-INSTALLED BY OWNER OR CONTRACTOR.
4. IF PROPOSAL IS ACCEPTED, SIGN AND RETURN COPY.

We Propose hereby to furnish material and labor — complete in accordance with the above specifications, for the sum of:
Zero and 00/100 Dollars dollars (\$)

Payment to be made as follows:
100% UPON COMPLETION

ADAM PAGE

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 _____

Note: This proposal may be withdrawn by us if not accepted within 30

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 _____

Date of Acceptance: _____

9/12/08

Signature _____

PRODUCT APPROVAL SPECIFICATION SHEET

Location: 282 SE MOJAVE WAY, L.L., FL **Project Name:** DONNA CASON


As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and the product approval number(s) on the building components listed below if they will be utilized on the construction project for which you are **applying for a building permit on or after April 1, 2004**. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. More information about statewide product approval can be obtained at www.floridapba.com

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
A. EXTERIOR DOORS			
1. Swinging			
2. Sliding			
3. Sectional			
4. Roll up			
5. Automatic			
6. Other			
B. WINDOWS			
1. Single hung			
2. Horizontal Slider			
3. Casement			
4. Double Hung			
5. Fixed			
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11. Dual Action			
12. Other			
C. PANEL WALL			
1. Siding			
2. Soffits			
3. EIFS			
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block			
8. Membrane			
9. Greenhouse			
10. Other			
D. ROOFING PRODUCTS			
1. Asphalt Shingles	ELK/GAF	30YR ARCHITECTURAL SHINGLES	FL. 9631.7
2. Underlayments	MFM	183 SELF-ADHESIVE	FL. 10064.01
3. Roofing Fasteners			
4. Non-structural Metal Rf			
5. Built-Up Roofing			
6. Modified Bitumen			
7. Single Ply Roofing Sys			
8. Roofing Tiles			
9. Roofing Insulation			
10. Waterproofing			
11. Wood shingles /shakes			
12. Roofing Slate			

Category/Subcategory (cont.)	Manufacturer	Product Description	Approval Number(s)
13. Liquid Applied Roof Sys			
14. Cements-Adhesives – Coatings			
15. Roof Tile Adhesive			
16. Spray Applied Polyurethane Roof			
17. Other			
E. SHUTTERS			
1. Accordion			
2. Bahama			
3. Storm Panels			
4. Colonial			
5. Roll-up			
6. Equipment			
7. Others			
F. SKYLIGHTS			
1. Skylight			
2. Other			
G. STRUCTURAL COMPONENTS			
1. Wood connector/anchor			
2. Truss plates			
3. Engineered lumber			
4. Railing			
5. Coolers-freezers			
6. Concrete Admixtures			
7. Material			
8. Insulation Forms			
9. Plastics			
10. Deck-Roof			
11. Wall			
12. Sheds			
13. Other			
H. NEW EXTERIOR ENVELOPE PRODUCTS			
1.			
2.			

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) the performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.

I understand these products may have to be removed if approval cannot be demonstrated during inspection


 Contractor or Contractor's Authorized Agent Signature

ADAM PAVE
 Print Name Date

Location

Permit # (FOR STAFF USE ONLY)

