

DATE 02/09/2009

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000027626

APPLICANT DARRELL TURNER PHONE 386.755.0086
ADDRESS POB 3307 FL 32056
OWNER BETTY SUE HANCOCK PHONE 386.438.5039
ADDRESS 164 SE CRAIG AVENUE LAKE CITY FL 32025
CONTRACTOR DARRELL TURNER PHONE 386.755.0086
LOCATION OF PROPERTY 90-E TO CRAIG,TR 3RD HOME ON R.

TYPE DEVELOPMENT REROOF/SFD ESTIMATED COST OF CONSTRUCTION 6500.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT REAR SIDE
NO. EX.D.U. 1 FLOOD ZONE DEVELOPMENT PERMIT NO.

PARCEL ID 33-3S-17-06532-000 SUBDIVISION HIGHLAND ESTATES
LOT 10 BLOCK B PHASE UNIT TOTAL ACRES

CCC1328465
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING X-09-038 JLW N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: NOC ON FILE.

Check # or Cash 4872

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 \$ 35.00 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 35.00
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."

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.

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

Columbia County Building Permit Application

For Office Use Only Application # 0902-11 Date Received 2/9 By JW Permit # 27626

Zoning Official _____ 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. _____ Fax 755-4660

Name Authorized Person Signing Permit Daniel Turner Phone 755-0086

Address P.O. Box 3307 Lake City FL 32056

Owners Name Betty Sue Hancock Phone 438-5039

911 Address 1645 E Craig Ave Lake City FL 32025

Contractors Name Daniel Turner Phone Same

Address Same

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address _____

Mortgage Lenders Name & Address SREC

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

Property ID Number 33-35-17-06532-000 Estimated Cost of Construction 6500

Subdivision Name Highland Estates Lot 10 Block 5 Unit _____ Phase _____

Driving Directions E 90 to Craig turn Right 3/4 mile on Right

Number of Existing Dwellings on Property 1

Construction of Re-roof - 1/2 home 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 _____ 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.

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:

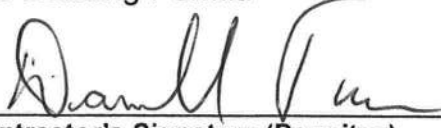
YOU ARE HEREBY NOTIFIED as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes 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.


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.


Contractor's Signature (Permitee)

Contractor's License Number CCC1328465
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 9 day of Feb 2009
Personally known _____ or Produced Identification _____


State of Florida Notary Signature (For the Contractor)

SEAL:



NOTICE OF COMMENCEMENT

Tax Parcel Identification Number 33-35-17-06532-000

County Clerk's Office Stamp or Seal

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

1. Description of property (legal description): Lot 10 Block 5 Highland
a) Street (job) Address: 164 SE Gray Ave
2. General description of improvements: Tear old Metal off & Install new
3. Owner Information
a) Name and address: Betty Sue Hancock 164 SE Gray Ave
b) Name and address of fee simple titleholder (if other than owner) _____
c) Interest in property _____
4. Contractor Information
a) Name and address: Danell Tim P.O. Box 3302 Lake City FL 32052
b) Telephone No.: 755-0086 Fax No. (Opt.): 755-8660
5. Surety Information
a) Name and address _____
b) Amount of Bond: _____
c) Telephone No.: _____ Fax No. (Opt.): _____
6. Lender
a) Name and address: _____
b) Phone No. _____
7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served
a) Name and address: _____
b) Telephone No.: _____ Fax No. (Opt.): _____
8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b) Florida Statutes:
a) Name and address: _____
b) Telephone No.: _____ Fax No. (Opt.): _____
9. Expiration date of Notice of Commencement (the expiration date is one 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 YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

STATE OF FLORIDA
COUNTY OF COLUMBIA

* 10. Betty Hancock
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
Betty Hancock
Print Name

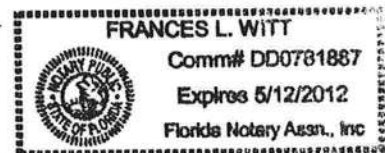
The foregoing instrument was acknowledged before me, a Florida Notary, this 9th day of Feb, 2009, by:
FRANCES L WITT as Notary (type of authority, e.g. officer, trustee, attorney
fact) for Betty Hancock (name of party on behalf of whom instrument was executed).

Personally Known ☒ OR Produced Identification _____ Type _____

Notary Signature

Frances L Witt

Notary Stamp or Seal:



11. Verification pursuant to Section 92.525, Florida Statutes. 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

Betty Hancock
Signature of Natural Person Signing (in line #10 above.)

@ CAM110M01 S CamaUSA Appraisal System

Columbia County

2/06/2009 15:30 Property Maintenance

9000 Land 001

Year T Property Sel

AG 000

2009 R 33-3S-17-06532-000 ... *

28299 Bldg 001

Owner HANCOCK BETTY SUE Conf

40 Xfea 001

Addr 164 SE CRAIG AVE HX WX DX

37339 TOTAL B*

-Cap?- .232 Total Acres

SOH 10% ApYr ERnwl ARnwl S/C Notc

City,St LAKE CITY

FL Zip 32025

Y 2006

Country

(PUD1)

(PUD2)

(PUD3) MKTA03

pod4

pod5

pod6

Appr By DFTW Date 2/08/2005 AppCode UseCd 000100 SINGLE FAMILY

TxDist Nbhd MktA ExCode Exemption/% TxCode Units Tp

002 33317.09 06 HX 25000

HIGHLAND WX 500 +

House# 164 Street CRAIG MD AVE Dir SE #

- City LAKE CITY

Subd N/A Condo .00 N/A

Sect 33 Twn 3S Rnge 17 Subd Blk Lot

Legals LOT 10 BLOCK 5 HIGHLAND ESTATES S/D. ORB 678-408,
688-596, POA 831-191, PROB # 01-117-CP ORB 931-2860 THRU +

Map# Mnt 1/31/2008 CHUCK

F1=Task F2=ExTx F3=Exit F4=Prompt F11=Docs F10=GoTo PgUp/PgDn F24=More

D.W. Turner Roofing Inc.
Proudly Serving Lake City
& Surrounding Counties
LIC# CCC1328465

Date	Estimate #
1/31/2009	949

Name / Address
Suwannee River Economic Council 1408 6th st Live Oak, FL <i>Betty Sue Hancock</i> <i>1645 E Craig Ave</i> <i>Lake City FL</i>

			Project
			Betty Sue Hancock
Description	Qty	Cost	Total
PRICE INCLUDES-29g Galvalume NEW METAL ROOF METAL PANELS EAVE DRIP RIDGE CAP VENTING SYSTEM BATTEN SYSTEM (1X4) GABLE TRIM VALLEY METAL SCREWS ALL MATERIALS TO FINISH ROOF OFF PIPE FLASHINGS DISPOSAL OF WASTE PERMITS PRICE INCLUDES ROTT REPAIR SPECIAL NOTE: TEAR OFF OLD PANELS, ROOF IS VERY OLD AND IN BAD CONDITION		6,500.00	6,500.00
		Total	\$6,500.00

Phone #	Fax #	E-mail
386-755-0086	386-7554660	dwturnerroofing@gmail.com

CERTIFICATE OF OCCUPANCY

OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

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.

Parcel Number 33-3S-17-06532-000

Building permit No. 000027626

Use Classification REROOF/SFD

Fire: 0.00

Permit Holder DARRELL TURNER

Waste:

Owner of Building BETTY SUE HANCOCK

Total: 0.00

Location: 164 SE CRAIG AVE., LAKE CITY, FL

Date: 02/16/2009

Harry Dickel

Building Inspector



POST IN A CONSPICUOUS PLACE
(Business Places Only)