

DATE 05/17/2019

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
 000038128

APPLICANT KELLY JOYNER PHONE 866.959.7663

ADDRESS POB 2147 LAKE CITY FL 32056

OWNER MICHAEL & ELIZABETH DYKES PHONE 912.826.0229

ADDRESS 355 SW ARBOR LN LAKE CITY FL 32024

CONTRACTOR LEWIS WALKER PHONE 866.959.7663

LOCATION OF PROPERTY 90-W TO BIRLEY, FL TO GABRIEL, TR TO THOMAS, TR TO ARBOR, FL
2ND ON R.

TYPE DEVELOPMENT REROOF/GARAGE ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES

FOUNDATION WALLS ROOF PITCH 5/12 FLOOR

LAND USE & ZONING MAX. HEIGHT

Minimum Set Back Requirements: STREET-FRONT REAR SIDE

NO. EX.D.U. 1 FLOOD ZONE DEVELOPMENT PERMIT NO.

PARCEL ID 31-3S-16-02413-004 SUBDIVISION

LOT BLOCK PHASE UNIT TOTAL ACRES 5.01

RC0067442
 Culvert Permit No. Culvert Waiver Contractor's License Number JLW N Applicant/Owner/Contractor

Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident Time/STUP No.

COMMENTS: NOC ON FILE.

Check # or Cash 6844

FOR BUILDING & ZONING DEPARTMENT ONLY

Temporary Power Foundation Monolithic (Footer Slab)

 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 Insulation

 date/app. by date/app. by

Rough-in plumbing above slab and below wood floor Electrical rough-in

 date/app. by date/app. by date/app. by

Heat & Air Duct Peri. beam (Lintel) Pool

 date/app. by date/app. by date/app. by

Permanent power C.O. Final Culvert

 date/app. by date/app. by date/app. by

Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing

 date/app. by date/app. by date/app. by

Reconnection RV Re-roof

 date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00

MISC. FEES \$ 75.00 ZONING CERT. FEE \$ FIRE FEE \$ 0.00 WASTE FEE \$

PLAN REVIEW FEE \$ FLOOD ZONE FEE \$ CULVERT FEES TOTAL FEE 75.00

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.

NOTICE: ALL OTHER APPLICABLE STATE OR FEDERAL PERMITS SHALL BE OBTAINED BEFORE COMMENCEMENT OF THIS PERMITTED DEVELOPMENT.

"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 RECEIVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECEIVED AN APPROVED INSPECTION WITHIN 180 DAYS OF THE PREVIOUS INSPECTION.

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

Columbia County Building Permit Application
Re-Roof's, Roof Repairs, Roof Over's

6844

For Office Use Only Application # 1905-59 Date Received 5/17 By [Signature] Permit # 38128

Plans Examiner _____ Date _____ ☐ NOC ☐ Deed or PA ☒ Contractor Letter of Auth. ☐ F W Comp. letter
☒ Product Approval Form ☐ Sub VF Form ☐ Owner POA ☐ Corporation Doc's and/or Letter of Auth.

Comments _____

Applicant (Who will sign/pickup the permit) KEITH JOYNER FAX 3867194472
Phone 8669597663

Address P.O. Box 2147 Lake City, FL 32056

Owners Name Michael Dykes Phone 912-826-0229

911 Address 355 SW Arbor Ln. Lake City, FL 32024

Contractors Name Lewis Walker Roofing, Inc. Phone 866-959-7663

Address P.O. Box 214 Lake City, FL 32056

Contractors Email _____ ***Include to get updates for this job.

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address _____

Mortgage Lenders Name & Address _____

Property ID Number 31-35-16-02413-004

Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____

Driving Directions N on NE Hernando Ave toward NE Madison St; 1st L on NE Madison St; 1st L on N. Marion Ave; 2nd R on W Duval St; L on SW Birley Ave; R on SW Gabriel Pl; R on SW Thomas Ter; 2nd L on SW Arbor Ln; Home is on R

Construction of (circle) Re-Roof - Roof repairs - Roof Overlay or Other _____

Cost of Construction \$5799.42 Commercial OR ☒ Residential

Type of Structure (House; Mobile Home; Garage; Exxon) Garage

Roof Area (For this Job) SQ FT 18 Sq Roof Pitch 5 /12, _____ /12 Number of Stories 1

Is the existing roof being removed ☒ Yes ☐ If NO Explain _____

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) shingle

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: 2014 Florida Building Code.**

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.

TIME LIMITATIONS OF PERMITS: 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 work is commenced. A valid permit receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous approved inspection.

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 CONTRACTOR AND AGENT: **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 CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

NOTICE TO OWNER: There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

X Michael Dykes
Print Owners Name

X M Dykes
Owners Signature

****Property owners must sign here before any permit will be issued.**

****If this is an Owner Builder Permit Application then, ONLY the owner can sign the building permit when it is issued.**

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 including all application and permit time limitations.

[Signature]
Contractor's Signature

Contractor's License Number RC-0067442
Columbia County
Competency Card Number 001174

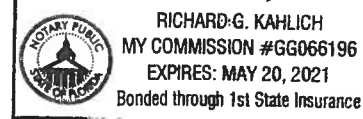
Affirmed under penalty of perjury to by the Contractor and subscribed before me this 23 day of April 2019.
Personally known or Produced Identification 1226-552-59-0300 Exp 1/30/21

[Signature]
State of Florida Notary Signature (For the Contractor)

SEAL:

Page 2 of 2 (Both Pages must be submitted together.)

Revised 7-1-15



As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. Statewide approved products are listed online @ www.floridabuilding.org

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
1. EXTERIOR DOORS			
A. SWINGING			
B. SLIDING			
C. SECTIONAL/ROLL UP			
D. OTHER			
2. WINDOWS			
A. SINGLE/DOUBLE HUNG			
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. FIXED			
E. MULLION			
F. SKYLIGHTS			
G. OTHER			
3. PANEL WALL			
A. SIDING			
B. SOFFITS			
C. STOREFRONTS			
D. GLASS BLOCK			
E. OTHER			
4. ROOFING PRODUCTS			
A. ASPHALT SHINGLES	GAF	Timberline	10124
B. NON-STRUCTURAL METAL			
C. ROOFING TILES			
D. SINGLE PLY ROOF			
E. OTHER			
5. STRUCTURAL COMPONENTS			
A. WOOD CONNECTORS			
B. WOOD ANCHORS			
C. TRUSS PLATES			
D. INSULATION FORMS			
E. LINTELS			
F. OTHERS			
6. NEW EXTERIOR			
ENVELOPE PRODUCTS			

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) performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.

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

Contractor OR Agent Signature

Date

NOTES: _____

Columbia County Property Appraiser

Jeff Hampton

2018 Tax Roll Year

updated: 3/29/2019

Parcel: << 31-3S-16-02413-004 >>

Owner & Property Info

Result: 1 of 1

Owner	DYKES MICHAEL & ELIZABETH DYKES (JTWSR) 355 SW ARBOR LN LAKE CITY, FL 32024		
Site	355 ARBOR LN, LAKE CITY		
Description*	COMM NE COR OF SEC, RUN SW 5 DEG ALONG E LINE 475.80 FT, W 1320 FT FOR POB, CONT W 276.32 FT, SW 5 DEG 790.96 FT TO N R/W OF A CO RD, E ALONG R/W 276.43 FT, NE 5 DEG 789.82 FT TO POB. PB 828-712, 832-212 THRU 219, 833- 456, 846-363 THRU 389, 873-1735, 883-2 ...more>>>		
Area	5.01 AC	S/T/R	31-3S-16
Use Code**	SINGLE FAM (000100)	Tax District	3

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

2018 Certified Values		2019 Working Values	
Mkt Land (1)	\$30,996	Mkt Land (1)	\$30,996
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (1)	\$230,115	Building (1)	\$231,262
XFOB (5)	\$20,864	XFOB (5)	\$20,864
Just	\$281,975	Just	\$283,122
Class	\$0	Class	\$0
Appraised	\$281,975	Appraised	\$283,122
SOH Cap [?]	\$5,010	SOH Cap [?]	\$0
Assessed	\$277,998	Assessed	\$283,122
Exempt	HX H3 OTHER \$50,500	Exempt	HX H3 \$50,000
Total Taxable	county:\$227,498 city:\$227,498 other:\$227,498 school:\$252,498	Total Taxable	county:\$233,122 city:\$233,122 other:\$233,122 school:\$258,122

Aerial Viewer Pictometry Google Maps

☒ 2019
 ☐ 2016
 ☐ 2013
 ☐ 2010
 ☐ 2007
 ☐ 2005
 ☒ Sales
**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
1/31/2018	\$290,200	1352/1498	WD	I	Q	01
6/24/2014	\$0	1276/1222	PB	I	U	18
9/18/2001	\$21,300	937/0352	WD	I	U	01

▼ Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	1	SINGLE FAM (000100)	1997	3095	5330	\$231,262

*Bldg_Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

▼ Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0166	CONC,PAVMT	1997	\$5,438.00	4833.000	0 x 0 x 0	AP (025.00)
0190	FPLC PF	1997	\$1,200.00	1.000	0 x 0 x 0	(000.00)

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

31-35-16-02413-004

Clerk's Office Stamp

Inst: 201912011378 Date: 05/17/2019 Time: 10:22AM
Page 1 of 1 B: 1384 P: 2082, P. DeWitt Cason, Clerk of Court
Columbia, County, By: BD
Deputy Clerk

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): LN.
a) Street (job) Address: 355 SW Arbor Way, Lake City, FL 32024
2. General description of Improvements: Roof
3. Owner Information or Lessee information if the Lessee contracted for the improvements:
a) Name and address: Mike Dykes SRA
b) Name and address of fee simple titleholder (if other than owner) _____
c) Interest in property _____
4. Contractor Information
a) Name and address: Lewis Walker Roofing, Inc. PO Box 2447 Lake City, FL 32052
b) Telephone No.: 866-959-7663
5. Surety Information (if applicable, a copy of the payment bond is attached):
a) Name and address: _____
b) Amount of Bond: _____
c) Telephone No.: _____
6. Lender
a) Name and address: _____
b) Phone No.: _____
7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:
a) Name and address: _____
b) Telephone No.: _____
8. In addition to himself or herself, 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: _____ OF _____
b) Telephone No.: _____
9. Expiration date of Notice of Commencement (the expiration date will be 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 YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

STATE OF FLORIDA
COUNTY OF COLUMBIA

10. X M. Dykes
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
X Michael Dykes
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 23 day of April, 2019, by:
Michael Dykes as owner for Michael Dykes
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

Personally Known _____ OR Produced Identification DL Type Exp. 1/30/20

Notary Signature

Notary Stamp or Seal:

