

DATE 03/17/2004

Columbia County Building Permit

This Permit Expires One Year From the Date of Issue

PERMIT

000021624

APPLICANT CHERESE NORTON PHONE 752-3331
 ADDRESS 3367 S US HIGHWAY 441 LAKE CITY FL 32025
 OWNER NORTON HOME IMPROVEMENT PHONE 752-3331
 ADDRESS 178 SW DEANNA TERR. LAKE CITY FL 32025
 CONTRACTOR NORTON HOME IMPROVEMENT PHONE _____
 LOCATION OF PROPERTY 47S, TR ON MARVIN BURNETT RD, TL ON DEANNA TERR, 3RD ON RIGHT
 TYPE DEVELOPMENT SFD, UTILITY ESTIMATED COST OF CONSTRUCTION 97250.00
 HEATED FLOOR AREA 1945.00 TOTAL AREA 2915.00 HEIGHT .00 STORIES 1
 FOUNDATION CONC WALLS FRAMED ROOF PITCH 6/12 FLOOR SLAB
 LAND USE & ZONING RSF2 MAX. HEIGHT 21
 Minimum Set Back Requirements: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00
 NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____
 PARCEL ID 07-4S-17-08111-119 SUBDIVISION HOLLY HILL
 LOT 19 BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES .50

Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number RB0031780
 EXISTING _____ 04-0241-N _____ BK _____ Applicant, Owner/Contractor RJ
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____
 COMMENTS: ONE FOOT ABOVE RD, NOC ON FILE

Check # or Cash 18246**FOR BUILDING & ZONING DEPARTMENT ONLY**

(footer/Slab)

Temporary Power _____ date/app. by _____ Foundation _____ date/app. by _____ Monolithic _____ date/app. by _____
 Under slab rough-in plumbing _____ date/app. by _____ Slab _____ date/app. by _____ Sheathing/Nailing _____ date/app. by _____
 Framing _____ date/app. by _____ Rough-in plumbing above slab and below wood floor _____ date/app. by _____
 Electrical rough-in _____ date/app. by _____ Heat & Air Duct _____ date/app. by _____ Peri. beam (Lintel) _____ date/app. by _____
 Permanent power _____ date/app. by _____ C.O. Final _____ date/app. by _____ Culvert _____ date/app. by _____
 M/H tie downs, blocking, electricity and plumbing _____ date/app. by _____ Pool _____ date/app. by _____
 Reconnection _____ date/app. by _____ Pump pole _____ date/app. by _____ Utility Pole _____ date/app. by _____
 M/H Pole _____ date/app. by _____ Travel Trailer _____ date/app. by _____ Re-roof _____ date/app. by _____

BUILDING PERMIT FEE \$ 490.00 CERTIFICATION FEE \$ 14.58 SURCHARGE FEE \$ 14.58
 MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ _____ WASTE FEE \$ _____
 FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ _____ TOTAL FEE 569.16

INSPECTORS OFFICE [Signature] 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

0403-18 3/8/04

Application Approved by - Zoning Official _____ Date _____ Plans Examiner _____ Date _____
Flood Zone X Development Permit N/A Zoning RSF-2 Land Use Plan Map Category RCD
Comments _____

Applicants Name Norton home Improvement Co., Inc Phone 386-752-3331
Address 3367 S US Hwy 441, Suite 101, Lake City, FL 32025
Owners Name Norton Home Improvement Co., Inc Phone 386-752-3331
911 Address 178 SW Deanna Ter., Lake City, FL 32025
Contractors Name James H. Norton Phone 386-752-3331
Address 3367 S US Hwy 441, Suite 101, Lake City, FL 32025
Fee Simple Owner Name & Address _____
Bonding Co. Name & Address _____
Architect/Engineer Name & Address Mike Todd, 129 North Colburn Ave, Lake City, FL 32055
Mortgage Lenders Name & Address NA
Property ID Number 07-4S-17-08111-119 Estimated Cost of Construction 80,000
Subdivision Name Holly Hill Lot 19 Block _____ Unit _____ Phase _____
Driving Directions 47 South, Right on Marvin Burnett Rd, to Deanna Terr turn Left go to 3rd on Right

Type of Construction New Home Construction SF Number of Existing Dwellings on Property 0
Total Acreage .5 Lot Size 122x175 Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
Actual Distance of Structure from Property Lines - Front 30' Side 16' Side 43' Rear 97'
Total Building Height 21' Number of Stories 1 Heated Floor Area 1945 Roof Pitch 6/12

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.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

James H. Norton
Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me
this 5 day of March 2004.
Personally known ✓ or Produced Identification _____

James H. Norton
Contractor Signature
Contractors License Number RB0031780
Competency Card Number 5209

NOTARY STAMP/SEAL

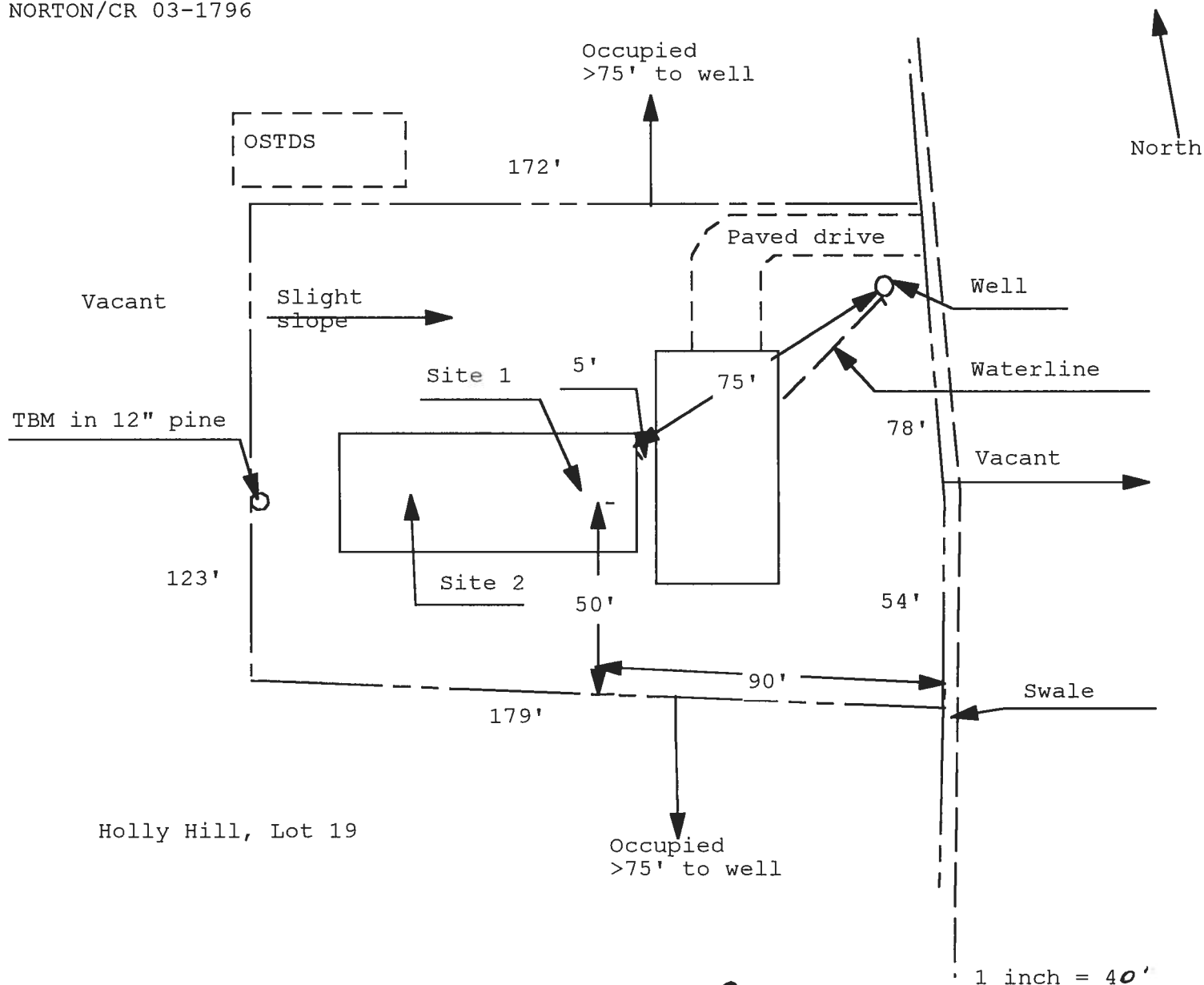
Patricia T. Peeler
Notary Signature
Patricia T. Peeler
My Commission DD129966
Expires September 05, 2006

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan

Permit Application Number: 04-0241N

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

NORTON/CR 03-1796



Site Plan Submitted By Paul Lloyd Date 2/25/04
Plan Approved ✓ Not Approved _____ Date 2/25/04

By Paul Lloyd Mr. J. N. C CPHU

Notes: 3-1-04

CAM112M01 S CamaUSA Appraisal System
3/08/2004 8:47 Legal Description Maintenance
Year T Property Sel
2004 R 07-4S-17-08111-119

Columbia County
9000 Land 001 *
AG 000
Bldg 000
Xfea 000
9000 TOTAL B

LOT 19 HOLLY HILL SD
NORTON HOME IMPROVEMENT CO INC

1	LOT 19 HOLLY HILL S/D.	ORB 826-313,, 826-2513.	2
3			4
5			6
7			8
9			10
11			12
13			14
15			16
17			18
19			20
21			22
23			24
25			26
27			28

Mnt 12/17/1996 TERR

F1=Task F3=Exit F4=Prompt F10=GoTo PGUP/PGDN F24=MoreKeys

NOTICE OF COMMENCEMENT FORM
COLUMBIA COUNTY, FLORIDA

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.

Tax Parcel ID Number 07-4S-17-08111-119

1. Description of property: (legal description of the property and street address or 911 address)
Lot 19 Holly Hill S/D 178 SW Deanna Ter., Lake City, FL 32025

Inst:2004005085 Date:03/08/2004 Time:08:43
YICK DC,P.Dewitt Cason,Columbia County B:1008 P:2921

2. General description of improvement: New Home Construction

3. Owner Name & Address Norton Home Improvement Co., Inc, 3367 S US Hwy 441, Suite 101, Lake City, FL 32025

Interest In Property own

4. Name & Address of Fee Simple Owner (If other than owner): owner

5. Contractor Name James H. Norton Phone Number 386-752-3331
Address 3367 S US Hwy 441, Suite 101, Lake City, FL 32025

6. Surety Holders Name NA Phone Number _____
Address _____

Amount of Bond _____

7. Lender Name NA Phone Number _____
Address _____

8. Persons within the State of Florida designated by the Owner upon whom notices or other documents may be served as provided by section 718.13 (1)(a) 7; Florida Statutes:

Name NA Phone Number _____
Address _____

9. In addition to himself/herself the owner designates NA of _____
to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) -
(a) 7. Phone Number of the designee _____

10. Expiration date of the Notice of Commencement (the expiration date is 1 (one) year from the date of recording, (Unless a different date is specified) _____

NOTICE AS PER CHAPTER 713, Florida Statutes:

The owner must sign the notice of commencement and no one else may be permitted to sign in his/her stead.

James H. Norton
Signature of Owner

Sworn to (or affirmed) and subscribed before
day of 5 March, 2004

NOTARY STAMP/SEAL



Patricia T. Peeler
My Commission DD129086
Expires September 05, 2009

Patricia T. Peeler
Signature of Notary

123'

Sec 7, TS 4S, R 17
LOT 19 HOLLY HILL S/D

97'

106'

102'

97'

179'

16'

20'

172'

43'

40'

30'

132'

DEANNA RD.

[Home](#)[Property Search](#)[Agriculture Classification](#)[Amendment 10](#)[Exemptions](#)[Tangible Property Tax](#)[Tax Rates](#)[Report & Map Pricing](#)[Important Dates](#)[Office Directory](#)[E-mail us Comments](#)**Parcel ID:** 07-4S-17-08111-119

Columbia County Property Appraiser

Owner & Property InfoShow: [Tax Info](#) | [GIS Map](#) | [Property Card](#)

Owner's Name	NORTON HOME IMPROVEMENT CO INC
Site Address	LOT 19 HOLLY HILL SD
Mailing Address	P O BOX 31 LAKE CITY, FL 32056
Brief Legal	LOT 19 HOLLY HILL S/D. ORB 826-313, 826-2513

Use Desc. (code)	VACANT (000000)
Neighborhood	7417.07
Tax District	2
UD Codes	
Market Area	01
Total Land Area	0.000 ACRES

Property & Assessment Values

Mkt Land Value	cnt: (1)	\$9,000.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value	\$9,000.00	

Just Value	\$9,000.00
Class Value	\$0.00
Assessed Value	\$9,000.00
Exempt Value	\$0.00
Total Taxable Value	\$9,000.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
8/22/1996	826/2513	WD	V	Q		\$8,000.00

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)	1.000 LT - (.000AC)	1.00/1.00/1.00/1.00	\$9,000.00	\$9,000.00

Columbia County Property Appraiser

DB Last Updated: 01/12/2004

1 of 1

Disclaimer

This information was derived from data which was compiled by the Columbia County Property Appraiser's

Compliance with Method B Chapter 6 of the Florida Energy Efficiency Code may be demonstrated by the use of Form 600B for single and multifamily residences of 3 stories or less in height, and additions to existing residential buildings. To comply, a building must meet or exceed all of the energy efficiency prescriptives in any one of the prescriptive component packages and comply with the prescriptive measures listed in Table 6B-1 of this form. An alternative method is provided for additions of 600 square feet or less by use of Form 600C. If a building does not comply with this method, it may still comply under other sections in Chapter 6 of the Code.

PROJECT NAME: AND ADDRESS:	<u>Norton Home</u>	BUILDER: <u>Norton Home Improvement</u>	CLIMATE ZONE: 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/>
	<u>Holly Hills</u> <u>Rose City</u>	PERMITTING OFFICE: <u>Columbia Co</u>	
OWNER:	PERMIT NO.: <u>21624</u>	JURISDICTION NO.: <u>221000</u>	

GENERAL DIRECTIONS

1. New construction including additions which incorporates any of the following features cannot comply using this method: steel stud walls, single assembly roof/ceiling construction, or skylights or other non-vertical roof glass.
2. Choose one of the component packages "A" through "E" from Table 6B-1 by which you intend to comply with the Code. Circle the column of the package you have chosen.
3. Fill in all the applicable spaces of the "To Be Installed" column on Table 6B-1 with the information requested. All "To Be Installed" values must be equal to or more efficient than the required levels.
4. Complete page 1 based on the "To Be Installed" column information.
5. Read "Minimum Requirements for All Packages", Table 6B-2 and check each box to indicate your intent to comply with all applicable items.
6. Read, sign and date the "Prepared By" certification statement at the bottom of page 1. The owner or owner's agent must also sign and date the form.

Please Print

CK

1. Compliance package chosen (A-F)
2. New construction or addition
3. Single family detached or Multifamily attached
4. If Multifamily—No. of units covered by this submission
5. Is this a worst case? (yes / no)
6. Conditioned floor area (sq. ft.)
7. Predominant eave overhang (ft.)
8. Glass type and area :
 - a. Clear glass
 - b. Tint, film or solar screen
9. Percentage of glass to floor area
10. Floor type, area or perimeter, and insulation:
 - a. Slab on grade (R-value)
 - b. Wood, raised (R-value)
 - c. Wood, common (R-value)
 - d. Concrete, raised (R-value)
 - e. Concrete, common (R-value)
11. Wall type, area and insulation:
 - a. Exterior: 1. Masonry (Insulation R-value)
 2. Wood frame (Insulation R-value)
 - b. Adjacent: 1. Masonry (Insulation R-value)
 2. Wood frame (Insulation R-value)
12. Ceiling type, area and insulation:
 - a. Under attic (Insulation R-value)
 - b. Single assembly (Insulation R-value)
13. Air Distribution System: Duct insulation, location
Test report (attach if required)
14. Cooling system
(Types: central, room unit, package terminal A.C., gas, none)
15. Heating system:
(Types: heat pump, elec. strip, nat. gas, L.P. gas, gas h.p., room or PTAC, none)
16. Hot water system:
(Types: elec., nat. gas, L.P. gas, solar, heat rec., ded. heat pump, other, none)

1.	<u>A</u>	
2.	<u>New</u>	
3.	<u>Single Fam.</u>	
4.	<u>N/A</u>	
5.	<u>NO</u>	
6.	<u>1945</u>	
7.	<u>2.0</u>	
	Single Pane	Double Pane
8a.	_____ sq. ft.	<u>290</u> sq. ft.
8b.	_____ sq. ft.	_____ sq. ft.
9.	<u>15</u> %	
10a.	R= <u>0</u>	_____ lin. ft.
10b.	R= _____	_____ sq. ft.
10c.	R= _____	_____ sq. ft.
10d.	R= _____	_____ sq. ft.
10e.	R= _____	_____ sq. ft.
11a-1	R= <u>11</u>	<u>1430</u> sq. ft.
11a-2	R= _____	_____ sq. ft.
11b-1	R= _____	_____ sq. ft.
11b-2	R= _____	_____ sq. ft.
12a.	R= <u>30</u>	<u>1945</u> sq. ft.
12b.	R= _____	_____ sq. ft.
13.	R= _____	
14a.	Type: <u>Ducted</u>	
14b.	SEER/EER: <u>12.5</u>	
14c.	Capacity: <u>2.5 Ton</u>	
15a.	Type: <u>Central</u>	
15b.	HSPF/COP/AFUE:	
15c.	Capacity: <u>30K</u>	
16a.	Type: <u>Elect</u>	
16b.	EF: <u>1.88</u>	

I hereby certify that the plans and specifications covered by the calculation are in compliance with the Florida Energy Code

PREPARED BY: [Signature] DATE: _____
I hereby certify that this building, as designed, is in compliance with the Florida Energy Code
OWNER AGENT: _____ DATE: _____

Review of plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed, this building will be inspected for compliance in accordance with Section 553.908, F.S.

BUILDING OFFICIAL: _____
DATE: _____

Notice of Prevention for Subterranean Termites

(As required by Florida Building Code (FBC) 104.2.6)



Live Oak
PEST CONTROL, INC.

A locally owned
company serving
you since 1972

17856 U.S. 129 • McALPIN, FLORIDA 32062
(386) 362-3887 • 1-800-771-3887 • Fax: (386) 364-3529

21624

Lot #19 Holly Hill L.C.

3/30/04
Date

7:30
Time

John F. ...
Applicator

...
Product Used

Supracarb
Chemical used (active ingredient)

382
Number of gallons applied

25
Percent Concentration

2496
Area treated (square feet)

563
Linear feet treated

Horizontal: Vertical: ...
Stage of treatment (Horizontal, Vertical, Adjoining Slab, retreat of disturbed area)

As per 104.2.6 - If soil chemical barrier method for Subterranean termite prevention is used, final exterior treatment shall be completed prior to final building approval.

If this notice is for the final exterior treatment, initial and date this line. _____

21624

Certificate of Compliance for Termite Protection
(As required by Florida Building Code (FBC) 1816.1.7)



LIVE OAK PEST CONTROL, INC.

17856 U.S. 129
McALPIN, FLORIDA 32062
(386) 362-3887
1-800-771-3887
Fax: (386) 364-3529

NORION HOME IMPROVEMENT Lot #19 HOLLY HILL SUB LAKE CITY, FL

Address of Treatment or Lot/Block of Treatment

soil barrier spray

Method of Termite Prevention Treatment - soil barrier, wood treatment, bait system, other
(describe)

The building has received a complete treatment for the prevention of subterranean termites.
The treatment is in accordance with rules and laws established by the Florida Department of
Agriculture and Consumer Services.

Montana Koff

Authorized Signature

COLUMBIA COUNTY OFFICE 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 07-4S-17-08111-119

Building permit No. 000021624

Use Classification SFD, UTILITY

Fire: 17.01

Permit Holder NORTON HOME IMPROVEMENT

Waste: 36.75

Owner of Building NORTON HOME IMPROVEMENT

Total: 53.76

Location: 178 SW DEANNA TERR. (HOLLY HILL, LOT 19)

Date: 07/27/2004

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

