

Columbia County Swimming Pool/Spa Permit Application

For Office Use Only Application # 1908-00 Date Received 8/1 By NG Permit # 38485
 Zoning Official 7.C Date 8-9-19 Flood Zone X Land Use Res. Zoning RSF-2
 FEMA Map # N/A Elevation N/A MFE _____ River N/A Plans Examiner 7.C Date 8-9-19
 Comments Front 25' Sides 10' Rear 15' Hs. Permit #38079
☒ NOC ☒ EH ☐ Deed or PA ☐ Site Plan ☐ 911 Sheet (If NO Address Exists) ☐ Owner Builder Disclosure Statement
☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter
☐ Land Owner Affidavit ☐ Ellisville Water ☒ App Fee Paid ☒ Sub VF Form.
 Notes:

Septic Permit No. 19-0270 Or City Water System _____ Fax None
 Applicant (Who will sign/pickup the permit) Raymond or Alice Peeler Phone 386 867 4888
or Chad Cunningham
 Address 158 SW Elk Hunter Glen Fort White Fl 32038
 Owners Name Ben & Cameron Scott Phone 623 6480
 911 Address 430 NW Country Lake Drive Lake City Fl 32055
 Contractors Name Raymond Peeler Phone 386 867 4888
 Address 158 SW Elk Hunter Glen Fort White Fl 32038
 Contractor Email peelerpools@gmail.com ***Include to get updates on this job.
 Fee Simple Owner Name & Address N/A
 Bonding Co. Name & Address N/A
 Architect/Engineer Name & Address Gary Gill 426 SW Commerce Dr Lake City Fl 32025
 Mortgage Lenders Name & Address N/A

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

Property ID Number 22 35 16 02267 501 Cost of Construction \$62,000
 Subdivision Name Country Lake in Woodborough Lot 1 Block _____ Unit _____ Phase _____
 Driving Directions Lake Jeffery → (L) Scenic Lake Dr to Country Lake Drive Lot #1
 Residential ☒ OR Commercial _____

Construction of Swimming Pool ADA Compliant _____ Total Acreage _____
 Actual Distance of Pool from Property Lines - Front 90+ Side 108' Side 97' Rear 60'

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 2014 and the 2011 National Electrical Code.

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 a permit has been issued.

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 Ben Scott
Print Owners Name

X Ben Scott
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.**

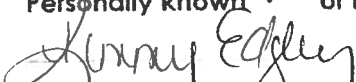
CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.


Contractor's Signature

Contractor's License Number CPC057105
Columbia County
Competency Card Number 515 ✓

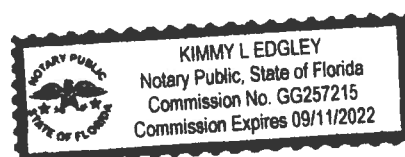
Affirmed under penalty of perjury to by the Contractor and subscribed before me this 26th day of September 2018.
Personally known ✓ or Produced Identification

SEAL:


State of Florida Notary Signature (For the Contractor)

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

Revised 7-1-15





COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21, Lake City, FL 32055

Office: 386-758-1008 Fax: 386-758-2160

www.columbiacountyfla.com/BuildingandZoning.asp

NOTICE TO SWIMMING POOL OWNERS

I, Ben and/or Cameron Scott have been informed and I understand that prior to the final inspection approval and use of my pool, I will need all the inspections approved and the required fencing installed in accordance with applicable regulations. The Florida Building Code requires private residential swimming pools, hot tubs, or non-portable spas containing water over 24 inches deep to meet the following pool barrier safety feature requirements:

- The pool access must be isolated by a barrier at least 4 feet high and installed around the perimeter of the pool.
Unless the pool is equipped with a safety cover complying with the specifications of American Society for Testing and Materials standard F-1346-91.
- The barrier shall not have any gaps or openings which would allow a child to crawl under, squeeze through or climb over and must be placed no less than 20 inches from the water's edge.
- Gates located in the pool barrier must open outward away from the pool and be both self-closing and self latching, with a release mechanism not less than 54" above the standing surface at the gate.
- The barrier must be separate from any other fence, wall, or other enclosure surrounding the yard unless the fence, wall or other enclosure or portion thereof is situated on the perimeter of the pool and meets the pool barrier requirements.
- Where a wall of a dwelling serves as part of the barrier **one** of the following shall apply:
 - 1) All doors and first floor windows with a sill height of less than 48 inches providing direct access from the home to the pool must be equipped with an alarm that has a minimum sound pressure rating of 85 decibels at 10 feet. The alarm shall sound immediately upon opening the window or door unless the temporary bypass mechanism is activated.
 - 2) **Or;** all doors providing direct access from the home to the pool must be equipped with a self-closing, self-latching device with a release mechanism located at least 54 inches above the floor.

According to Florida statutes chapter 515: Residential Swimming Pool Safety Act, failure to comply with these requirements is a misdemeanor of the second degree, punishable by imprisonment for up to 60 days or a fine of up to \$500, except that no penalty shall be imposed if within 45 days after arrest or issuance of a summons or notice to appear, the pool is equipped with the aforementioned safety features and the responsible person attends a drowning prevention education program developed by the Florida Department of Health. I also understand that there are several inspections required in addition to a final inspection for my swimming pool.

X Ben Scott 3-1-09 Cameron Scott
Owner Signature / Date

Address: 430 NW Country Lake Drive Lake City FL

Nigel Allen 2-26-19 CPC057105
Contractor Signature / Date License Number

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # 1908-06 JOB NAME _____

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

Columbia County issues combination permits. 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 general contractors permit.

NOTE: It shall be the responsibility of the general contractor to make sure that all of the subcontractors are licensed with the Columbia County Building Department.

Use website to confirm licenses: <http://www.columbiacountyfla.com/PermitSearch/ContractorSearch.aspx>

NOTE: If this should change prior to completion of the project, it is your responsibility to have a corrected form submitted to our office, before that work has begun.

Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name <u>MAT Burns</u> Signature _____	<u>Need</u> <input checked="" type="checkbox"/> Lic <input checked="" type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input checked="" type="checkbox"/> CC# <u>309</u>	Company Name: <u>MAT Burns Electric, Inc.</u> <u>386-365-3688</u> <u>CR II</u> License #: <u>EC 1300 6531</u> Phone #: <u>386-935-0444</u>	
MECHANICAL/	Print Name _____ Signature _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input type="checkbox"/> A/C CC# _____	Company Name: _____ License #: _____ Phone #: _____	
PLUMBING/	Print Name _____ Signature _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input type="checkbox"/> GAS CC# _____	Company Name: _____ License #: _____ Phone #: _____	
ROOFING	Print Name _____ Signature _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input type="checkbox"/> CC# _____	Company Name: _____ License #: _____ Phone #: _____	
SHEET METAL	Print Name _____ Signature _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input type="checkbox"/> CC# _____	Company Name: _____ License #: _____ Phone #: _____	
FIRE SYSTEM/	Print Name _____ Signature _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input type="checkbox"/> SPRINKLER CC# _____	Company Name: _____ License #: _____ Phone #: _____	
SOLAR	Print Name _____ Signature _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input type="checkbox"/> CC# _____	Company Name: _____ License #: _____ Phone #: _____	
STATE	Print Name _____ Signature _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<input type="checkbox"/> SPECIALTY CC# _____	Company Name: _____ License #: _____ Phone #: _____	

Columbia County Property Appraiser

Jeff Hampton

2018 Tax Roll Year

updated: 6/25/2019

Parcel: << **22-3S-16-02267-501** >>

Aerial Viewer Pictometry Google Maps

Owner & Property Info

Result: 1 of 1

Owner	SCOTT BENJAMIN D & CAMERON L SCOTT 430 NW COUNTRY LAKE DR LAKE CITY, FL 32055		
Site	430 COUNTRY LAKE DR, LAKE CITY		
Description*	LOT 1 COUNTRY LAKE IN WOODBOROUGH PHASE 5. WD 1369-1572,		
Area	1.47 AC	S/T/R	22-3S-16E
Use Code**	VACANT (000000)	Tax District	2

*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	
There are no 2018 Certified Values for this parcel	Mkt Land (1)	\$38,124
	Ag Land (0)	\$0
	Building (0)	\$0
	XFOB (0)	\$0
	Just	\$38,124
	Class	\$0
	Appraised	\$38,124
	SOH Cap [?]	\$0
	Assessed	\$38,124
	Exempt	\$0
	Total Taxable	county:\$38,124 city:\$38,124 other:\$38,124 school:\$38,124

**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
9/27/2018	\$48,500	1369/1572	WD	V	Q	01

▼ Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
NONE						

▼ Extra Features & Out Buildings (Codes)

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

▼ Land Breakdown

Land Code	Desc	Units	Adjustments	Eff Rate	Land Value
000000	VAC RES (MKT)	1.000 LT - (1.470 AC)	1.00/1.00 1.75/1.00	\$38,124	\$38,124

NOTICE OF COMMENCEMENT

STATE OF FLORIDA COUNTY OF Columbia **CITY OF** Lake City

THE UNDERSIGNED hereby gives notice that improvement(s) 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.

DESCRIPTION OF PROPERTY:

LOT 1 BLOCK _____ SECTION _____ TOWNSHIP _____ RANGE _____

TAX PARCEL # 22 35 16 02267 501

SUBDIVISION: Country Lake in Woodbrook PLATBOOK: _____ MAP PAGE# _____

STREET ADDRESS: 430 NW Country Lake Drive

Lake City FL 32055

GENERAL DESCRIPTION OF IMPROVEMENT:

TO CONSTRUCT: SWIMMING POOL- RESIDENTIAL

OWNER INFORMATION:

OWNER(S) NAME: Ben D and Cameron L. Scott

ADDRESS: 430 NW Country Lake Dr. PHONE 623 6480

CITY: Lake City STATE FL ZIP 32055

INTEREST IN THE PROPERTY: Owner

FEE SIMPLE TITLEHOLDER NAME: _____

FEE SIMPLE TITLEHOLDER ADDRESS: (IF OTHER THAN OWNER) _____

CONTRACTOR NAME: Peeler Pools, Inc

ADDRESS: 158 SW Elk Hunter Glen Ft. White, FL 32038 386-755-2848

BONDING COMPANY: N/A ADDRESS: N/A PHONE NUMBER N/A

CITY: N/A STATE N/A ZIP CODE: N/A

LENDER NAME: First Federal Savings Bank

ADDRESS: US Hwy 90 west PHONE _____

CITY: Lake City STATE FL ZIP 32055

Prepared by: Peeler Pools, Inc. (Raymond Peeler)

Return to : Peeler Pools, Inc. 158 SW Elk Hunter Glen Ft. White, FL 32038 386-755-2848

Persons 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.

NAME: None ADDRESS: N/A

In addition to himself, Owner designates: Raymond Peeler of Peeler Pools, Inc.

158 SW Elk Hunter Glen Ft. White, FL 32038 386-755-2848

to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.

Expiration date is 1 year from date of recording unless a different date is specified.

SIGNATURE OF OWNER

Ben Scott

Cameron Scott

SWORN to and subscribed before me this 31 day of July year of 2019

Notary Public _____ My commission expires _____

Signature: Alice Burke Peeler



ALICE BURKE PEELER
Commission # GG 122000
Expires September 15, 2021
Bonded Thru Budget Notary Services

***WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, 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.

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 19-0270

B. Scott

PART II - SITEPLAN

Scale: 1 inch = 40 feet.

See attached

Notes:

Site Plan submitted by:

Rocky D 7

MASTER CONTRACTOR

Plan Approved ☒

Not Approved ☐

Date 3/29/19

By

Sam Adams

BI

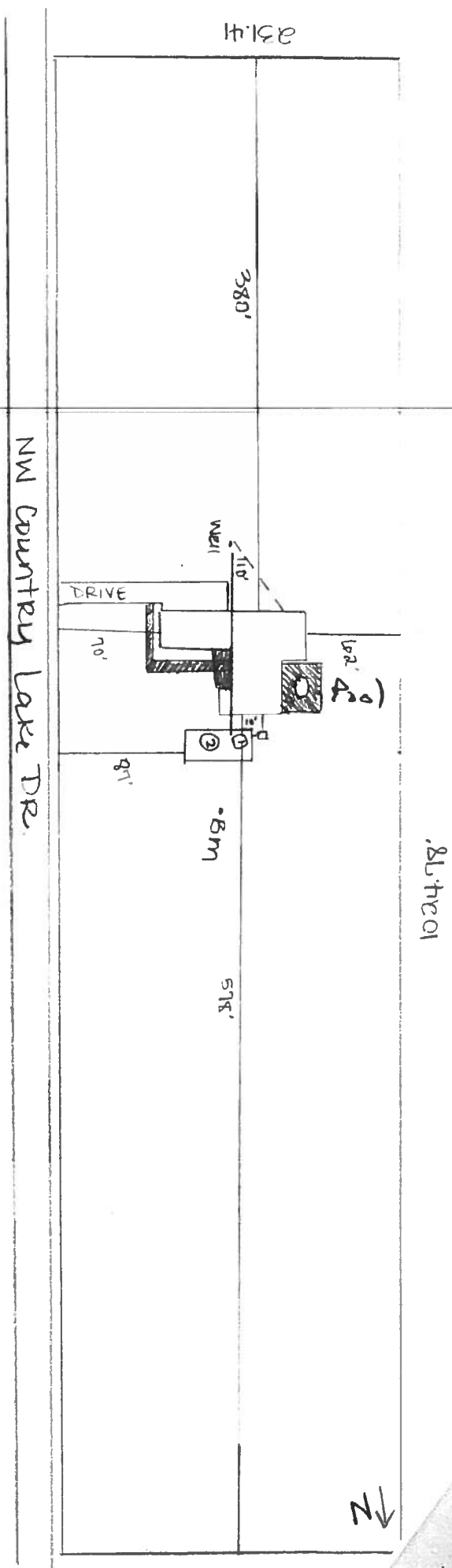
Columbia

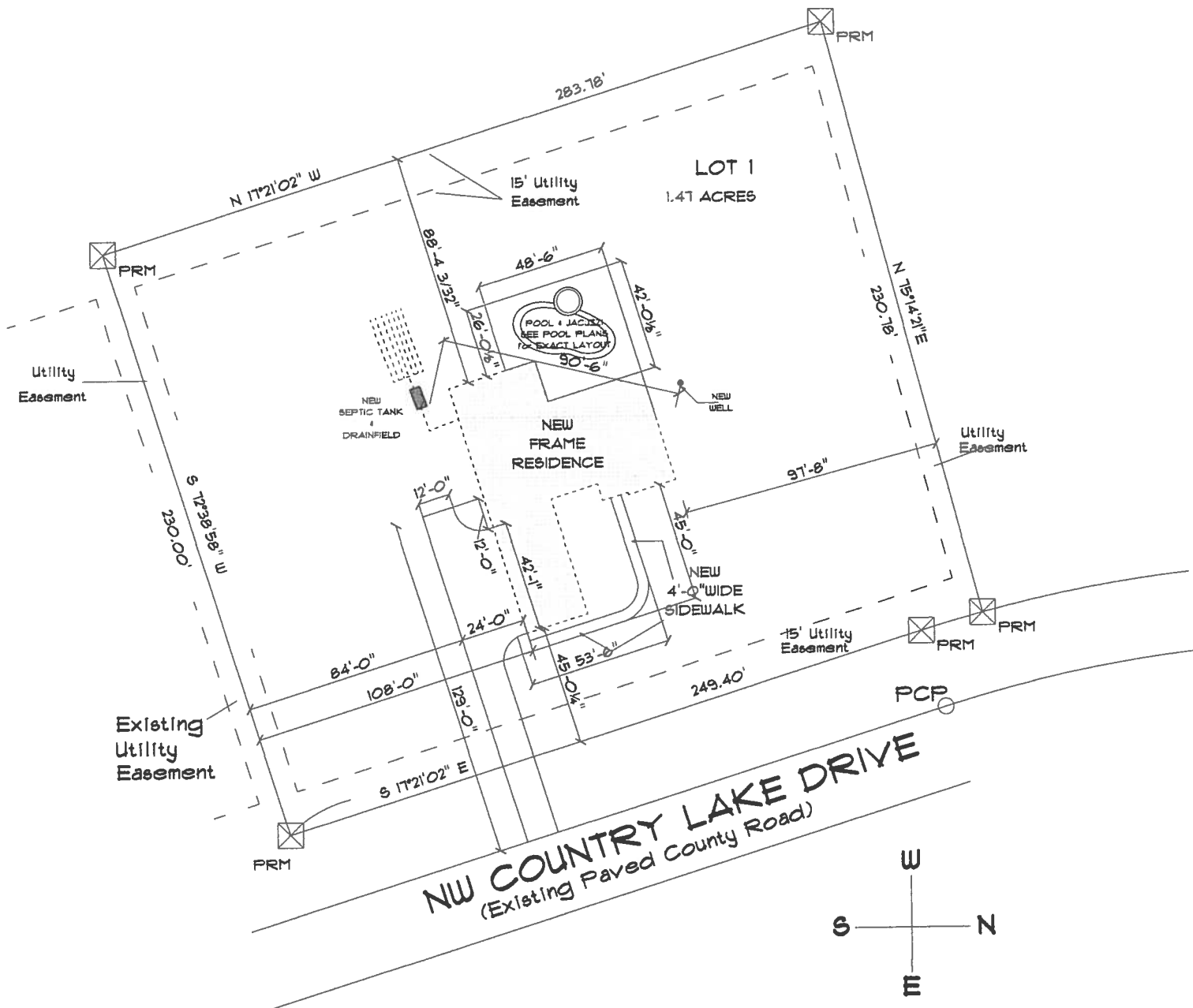
County Health Department

4/9/19

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Kathy D
3/22/19





* SITE PLAN *

SCALE : 1" = 30'

Ben Scott

