

cell
- 5259 -

Columbia County New Building Permit Application

✓ FRANKS - EX CA 20
✓ TRUSS REPORTS

For Office Use Only Application # 44097 Date Received 11/27 By JW Permit # 39030
Zoning Official LW/4 Date 12-2-19 Flood Zone X Land Use RLD Zoning RSF-2
FEMA Map # _____ Elevation _____ MFE 99' River _____ Plans Examiner J.C. Date 12-5-19
Comments _____
☒ NOC ☒ EH ☒ Deed or PA ☒ Site Plan ☐ State Road Info ☒ Well letter ☒ 911 Sheet ☐ Parent Parcel # _____
☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter
☐ Owner Builder Disclosure Statement ☐ Land Owner Affidavit ☐ Ellisville Water ☒ App Fee Paid ☒ Sub VF Form

Septic Permit No. 18-0548 OR City Water ☐ Fax _____
Applicant (Who will sign/pickup the permit) Bradley Franks Phone 2000 386 755 2455
Address 455 SW Deputy J Davis Ln, Lake City FL 32024
Owners Name Bradley Franks Construction, LLC Phone 386-755-2455
911 Address 315 Arrowbend Dr, Lake City FL 32024
Contractors Name 1614 Bradley Franks Phone 386-755-2455
Address 455 SW Deputy J Davis Ln, Lake City FL 32024
Contractor Email 2328 Bradley@bradleyfranks.com ***Include to get updates on this job.

Fee Simple Owner Name & Address _____
Bonding Co. Name & Address _____
Architect/Engineer Name & Address Nick Giesler, 1758 NW Brown Rd, Lake City FL 32055
Mortgage Lenders Name & Address _____

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

Property ID Number 24-4S-16-03114-127 Estimated Construction Cost 150,000

Subdivision Name Cannon Creek Place Lot 27 Block _____ Un. _____ Phase _____

Driving Directions from a Major Road Take 90 West to Sister's Welcome Rd Turn Left, Approx, 4 miles turn left on Kicklighter, after Rd turns sharply take right on Gerald Conner Dr into Cannon Creek Place

Subdivision. Arrowbend Drive is the second road to the left, property is located on the left of Arrowbend.

Construction of Single Family Home Commercial OR Yes Residential

Proposed Use/Occupancy Single Family Dwelling Number of Existing Dwellings on Property _____

Is the Building Fire Sprinkled? _____ If Yes, blueprints included _____ Or Explain _____

Circle Proposed ☒ Culvert Permit or ☐ Culvert Waiver or ☐ D.O.T. Permit or ☐ Have an Existing Drive

Actual Distance of Structure from Property Lines - Front 35' Side 28' Side 28.5' Rear 69.5'

Number of Stories 1 Heated Floor Area 1614 Total Floor Area 2328 Acreage .50

Zoning Applications applied for (Site & Development Plan, Special Exception, etc.) _____

See Sent email 12-6-19

Columbia County Building Permit Application

CODE: Florida Building Code 2017 and the 2014 National Electrical Code.

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.

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 pursued in good faith or 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.

✓
Bradley Franks

Print Owners Name


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

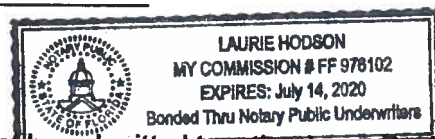
Contractor's License Number RG291103874
Columbia County
Competency Card Number 1448

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 27th day of November 2019.

Personally known ☒ or Produced Identification ☐


State of Florida Notary Signature (For the Contractor)

SEAL:

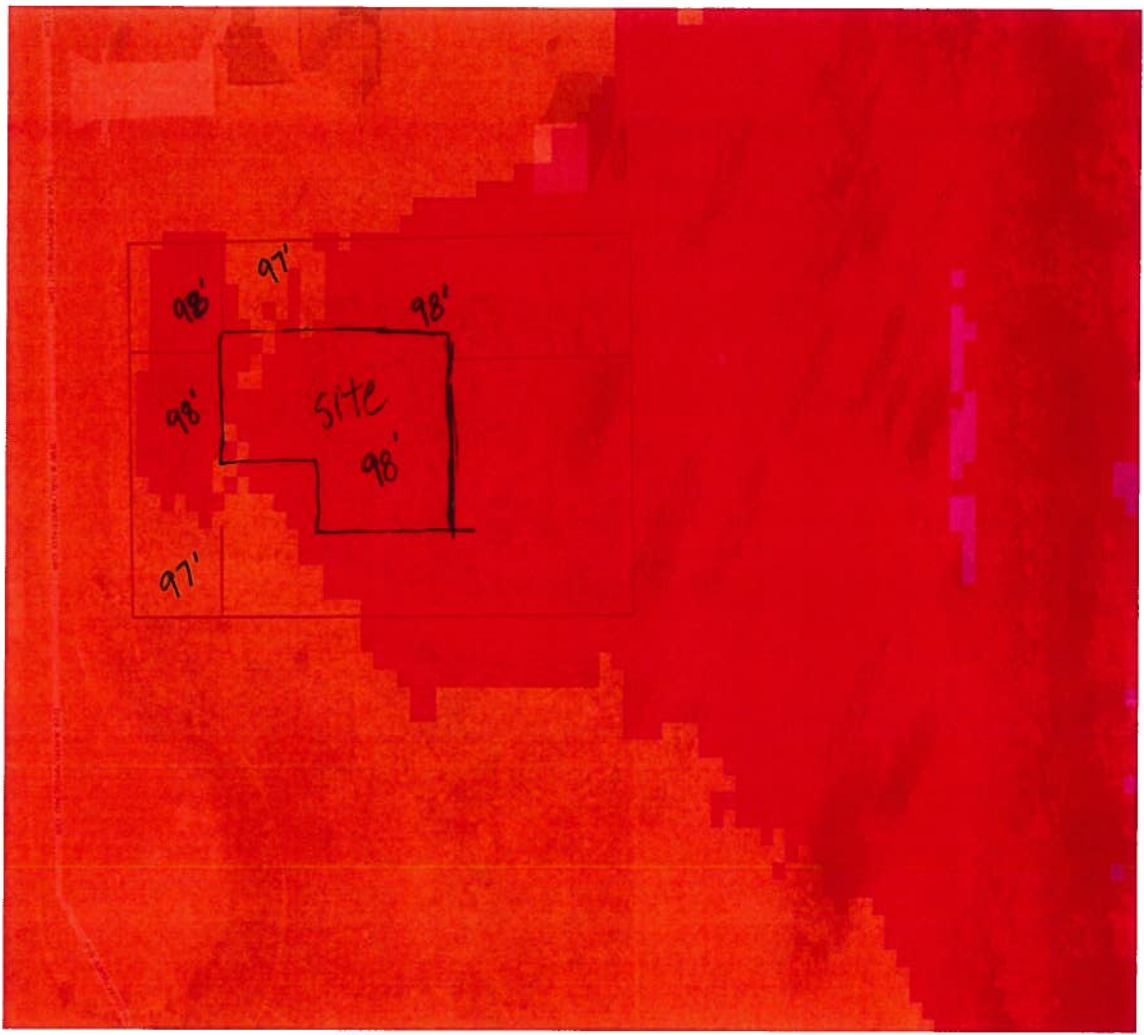


Legend

- Parcels
- 2018 Flood Zones
 - 0.2 PCT ANNUAL CHANCE
 - A
 - AE
 - AH
- 2018Aerials
- SRWMD Wetlands
- Roads
 - Roads
 - others
 - Dirt
 - Interstate
 - Main
 - Other
 - Paved
 - Private
- LidarElevations

Columbia County, FLA - Building & Zoning Property Map

Printed: Mon Dec 02 2019 09:13:58 GMT-0500 (Eastern Standard Time)



Parcel Information

Parcel No: 24-4S-16-03114-127
Owner: BRADLEY FRANKS
Subdivision: CANNON CREEK PLACE
Lot: 27
Acres: 0.496354342
Deed Acres:
District: District 3 Bucky Nash
Future Land Uses: Residential - Low
Flood Zones:
Official Zoning Atlas: RSF-2

Inst: 201812010033 Date: 05/17/2018 Time: 4:16PM
Page 1 of 2 R: 1360 P: 801, P.DeWitt Cason, Clerk of Court
Columbia, County, By: BD
Deputy ClerkDoc Stamp-Deed: 0.70

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 25th day of April, 2018,

by first party, Grantor, Catherine H. Bryan, a married woman

whose post office address is 997 SW Troy Street, Lake City, FL 32024

to second party, Grantee, Bradley Franks Construction, LLC

whose post office address is 257 SW Hudson Lane, Lake City, FL 32025

WITNESSETH, That the said first party, for good consideration and for the sum of
ONE HUNDRED AND 00/100'S Dollars (\$ 100.00) paid by the said second
party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim
unto the said second party forever, all the right, title, interest and claim which the said first party
has in and to the following described parcel of land, and improvements and appurtenances there-
to in the County of Columbia , State of Florida to wit:

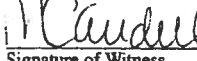
Lot 27, Cannon Creek Place, according to the map or plat thereof, as recorded in Plat Book 8, Page
31, of the Public Records of Columbia County, Florida

24-4S-16 0000/0000 0.51 acres
LOT 27 CANNON CREEK PLACE S/D
WD 1064 - 1247, WD 1187- 2144

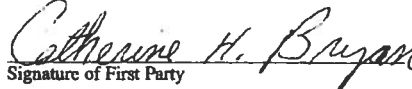
IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:


Signature of Witness

Donald R. Sahl Jr.
Print name of Witness


Signature of Witness

Meagan Caudell
Print name of Witness


Signature of First Party

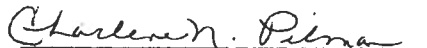
Catherine H. Bryan
Print name of First Party

Signature of First Party

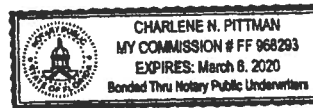
Print name of First Party

State of Florida)
County of Columbia
On April 25, 2018 before me,

appeared Catherine H. Bryan
personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s)
is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their
authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon
behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.


Signature of Notary

Affiant Known ☒ Produced ID
Type of ID FLDL 8658-133-43-524-0
(Seal)



SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # 44097 JOB NAME Bradley FRANKS Construction, LLC

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 <input checked="" type="checkbox"/> 7117 CC# _____ | Print Name <u>Oscar Gray</u> Signature  Company Name: <u>Dependable Htg, A/C & Electrical Contractor, Inc.</u> License #: <u>EC0001471</u> Phone #: <u>904-259-6546</u> | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| MECHANICAL/A/C <input type="checkbox"/> CC# _____ | Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| PLUMBING/GAS <input type="checkbox"/> CC# _____ | Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| ROOFING <input type="checkbox"/> CC# _____ | Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| SHEET METAL <input type="checkbox"/> CC# _____ | Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| FIRE SYSTEM/SPRINKLER <input type="checkbox"/> CC# _____ | Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| SOLAR <input type="checkbox"/> CC# _____ | Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |
| STATE SPECIALTY <input type="checkbox"/> CC# _____ | Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE |

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT #

44097

JOB NAME

F ranks/

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

| | | | |
|-------------------------------------|--|------------------------------|--|
| ELECTRICAL | Print Name _____ | Signature _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> Ex <input type="checkbox"/> DE |
| <input type="checkbox"/> | Company Name: _____ | | |
| CC# _____ | License #: _____ | Phone #: _____ | |
| MECHANICAL/A/C | Print Name <u>David Hall</u> | Signature <u>[Signature]</u> | Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> Ex <input type="checkbox"/> DE |
| <input checked="" type="checkbox"/> | Company Name: <u>David Hall's Inc.</u> | | |
| CC# <u>568</u> | License #: <u>CAC057424</u> | Phone #: <u>386 755-9792</u> | |
| PLUMBING/GAS | Print Name <u>[Signature]</u> | Signature <u>[Signature]</u> | Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> Ex <input type="checkbox"/> DE |
| <input checked="" type="checkbox"/> | Company Name: <u>Burris Plumbies</u> | | |
| CC# <u>715</u> | License #: <u>CFC147145</u> | Phone #: <u>386 823-0509</u> | |
| ROOFING | Print Name <u>Bradley Franks</u> | Signature <u>[Signature]</u> | Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> Ex <input type="checkbox"/> DE |
| <input checked="" type="checkbox"/> | Company Name: <u>Bradley Franks Construction</u> | | |
| CC# <u>1448</u> | License #: <u>RG291103874</u> | Phone #: <u>386-755-2455</u> | <input checked="" type="checkbox"/> <u>David</u> |
| SHEET METAL | Print Name _____ | Signature _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> Ex <input type="checkbox"/> DE |
| <input type="checkbox"/> | Company Name: _____ | | |
| CC# _____ | License #: _____ | Phone #: _____ | |
| FIRE SYSTEM/SPRINKLER | Print Name _____ | Signature _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> Ex <input type="checkbox"/> DE |
| <input type="checkbox"/> | Company Name: _____ | | |
| CC# _____ | License #: _____ | Phone #: _____ | |
| SOLAR | Print Name _____ | Signature _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> Ex <input type="checkbox"/> DE |
| <input type="checkbox"/> | Company Name: _____ | | |
| CC# _____ | License #: _____ | Phone #: _____ | |
| STATE SPECIALTY | Print Name _____ | Signature _____ | Need <input type="checkbox"/> Lic <input type="checkbox"/> Lab <input type="checkbox"/> W/C <input type="checkbox"/> Ex <input type="checkbox"/> DE |
| <input type="checkbox"/> | Company Name: _____ | | |
| CC# _____ | License #: _____ | Phone #: _____ | |

District No. 1 - Ronald Williams
District No. 2 - Rusty DePratter
District No. 3 - Bucky Nash
District No. 4 - Everett Phillips
District No. 5 - Tim Murphy

BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY



Address Assignment and Maintenance Document

To maintain the county wide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Services Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County

Date/Time Issued: **11/15/2018 4:49:36 PM**
Address: **315 SW ARROWBEND Dr**
City: **LAKE CITY**
State: **FL**
Zip Code **32024**

Parcel ID **03114-127**

REMARKS: Address Verification.

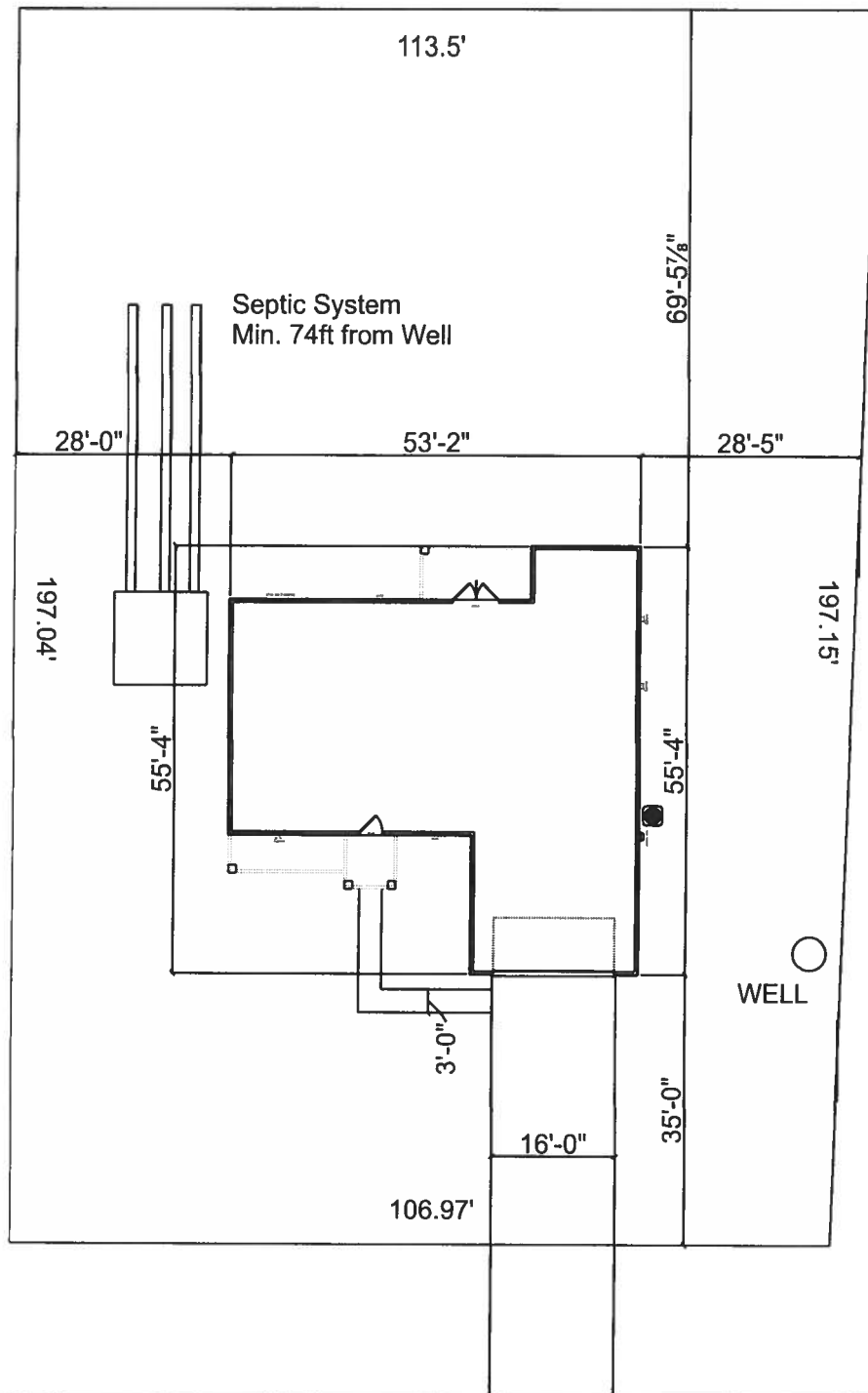
NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

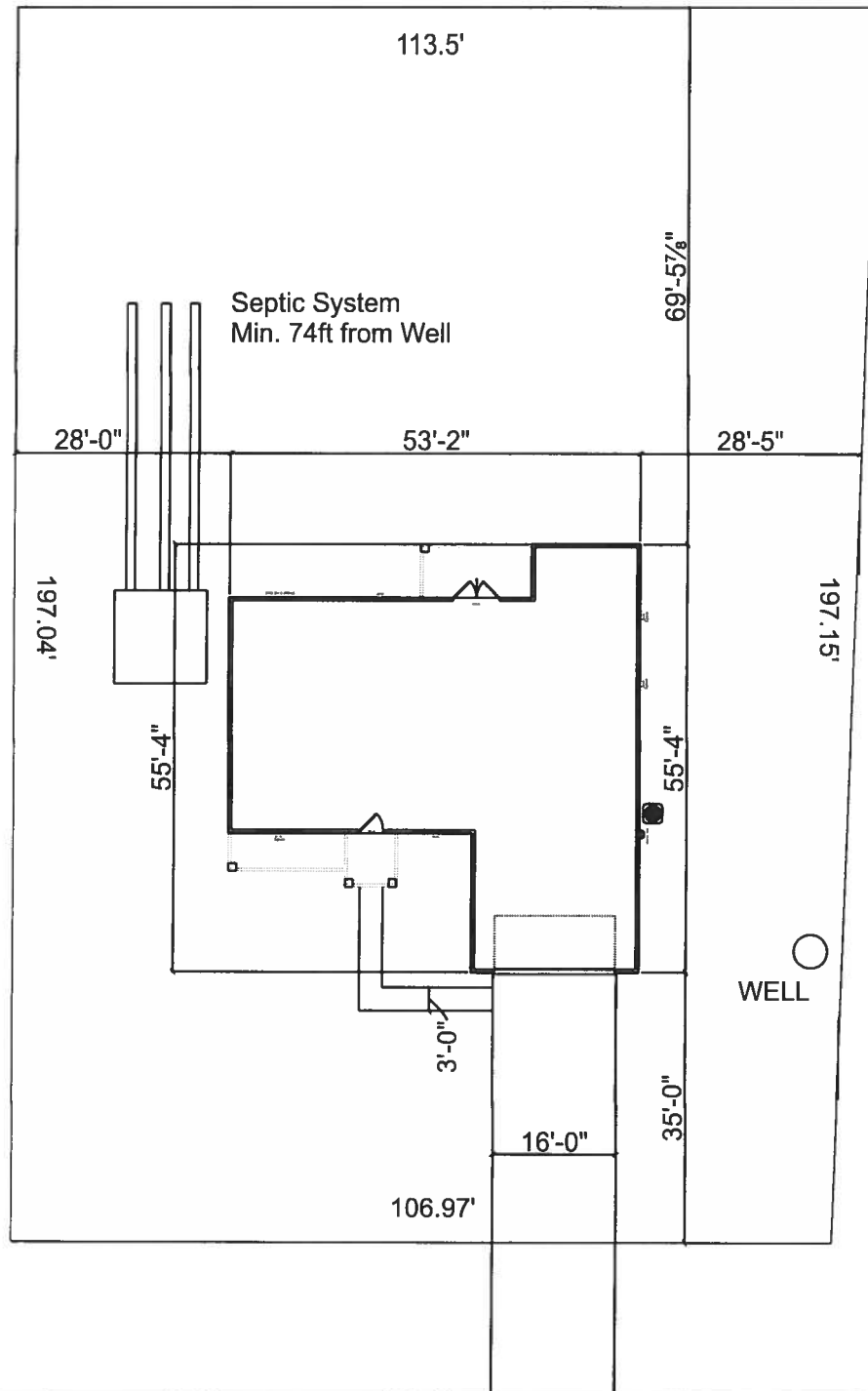
**COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT**

**263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com**



315 Arrowbend Dr
Lake City FL 32024
24-4S-16-03114-127

Arrowbend Drive



315 Arrowbend Dr
Lake City FL 32024
24-4S-16-03114-127

Arrowbend Drive

(SSOCOF # : 177808181 done on: 06-26-2018)



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

PERMIT NO. 18-0548
DATE PAID: 6/28/18
FEE PAID: 310.00
RECEIPT #: AP1352663

APPLICATION FOR:

[☒] New System [] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: **BRADLEY FRANKS CONSTRUCTION, LLC**

AGENT: **Ronald Ford - Ford's Septic**

TELEPHONE: **386-755-6288**

MAILING ADDRESS: **116 NW Lawley Way Lake City, Florida 32055**

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 27 BLOCK: _____ SUBDIVISION: **Cannon Creek Place** PLATTED: _____

PROPERTY ID #: **24-4S-16-03114-127** ZONING: Res. I/M OR EQUIVALENT: [Y] ☒ N

PROPERTY SIZE: 0.51 ACRES WATER SUPPLY: [☒] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y] ☒ N DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: **315 SW ARROWBEND DRIVE LAKE CITY, FLORIDA 32024**

DIRECTIONS TO PROPERTY: **From Columbia County Health Department:**

Travel WEST on Hwy. 90 Turn LEFT on Sisters Welcome Road. Turn LEFT on Kicklighter Road. Turn LEFT on Cannon Creek Drive. Turn RIGHT on Gerald Conner. Turn LEFT on Arrowbend.

PROPERTY # 315 on LEFT.

BUILDING INFORMATION

[☒] RESIDENTIAL [] COMMERCIAL

| Unit No | Type of Establishment | No. of Bedrooms | Building Area Sqft | Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC |
|---------|-----------------------|-----------------|--------------------|--|
| 1 | S.F.R | 3 | 1707 | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |

[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE: Ronald Ford DATE: 6-11-2018

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 18-0548



North

PART II - SITEPLAN

*scale: one inch = _____ feet

See
attached.

Thank you!

Notes: _____

315 SW Arrowbend Drive Lake City, Florida 32024

Site Plan submitted by: DC Fred

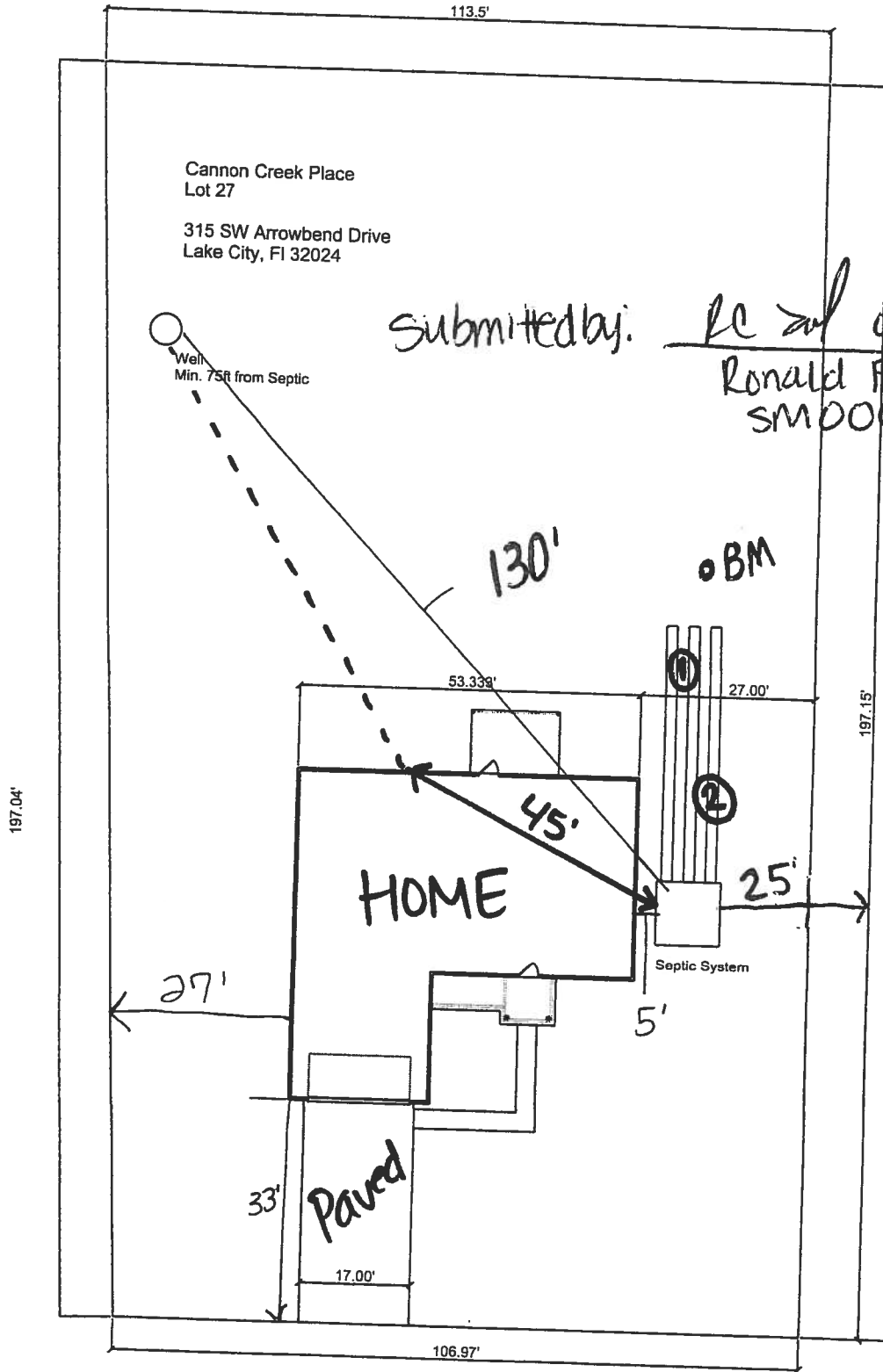
Plan Approved Sam Mun Not Approved _____ Date 11/16/18
By ES1 Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Scale: one inch = 20 feet

18-0548

NORTH ↑



SW Arrowbend Drive

11/22/2019

To: Columbia County Building Department

A&B Well Drilling, Inc.

5673 NW Lake Jeffery Road
Lake City, FL 32055
Telephone: (386) 758-3409
Cell: (386) 623-3151
Fax: (386) 758-3410
Owner: Bruce Park

Description of Well to be installed for Customer _____

Located @ Address: _____ 315 SW Arrowbend dr _____ lot 27b cannon creek

1 HP 20 GPM submersible pump, 1 1/4" drop pipe, 85 gallon captive tank, and backflow prevention.
With SRWMD permit.

_____**Bruce Park**_____

Sincerely,
Bruce N. Park
President

"CANNON CREEK PLACE"

IN SECTION 24, TOWNSHIP 4 SOUTH, RANGE 16 EAST,
COLUMBIA COUNTY, FLORIDA

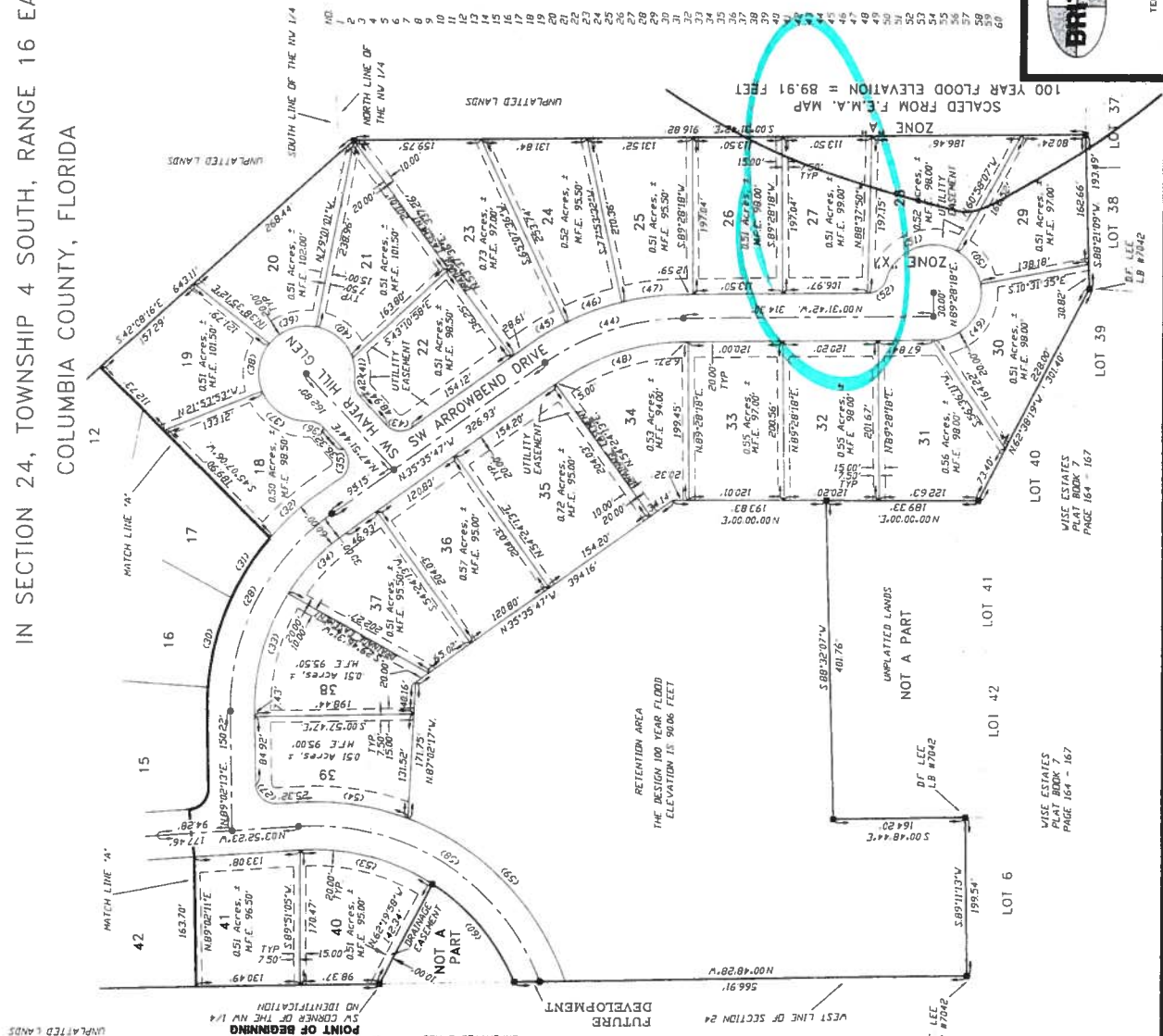
PLAT BOOK 8
PAGES 34
SHEET 4 OF 4

SYMBOL LEGEND
 P.M. PERMANENT REFERENCE MONUMENT
 P.L.S. PROFESSIONAL LAND SURVEYOR
 C. CENTERLINE
 4"x4" CONCRETE MONUMENT
 M.F.E. MINIMUM FLOOR ELEVATION
 TYP. TYPICAL
 NAIL AND DISK
 PERMANENT CONTROL POINT

SCALE: 1" = 100'
 GRAPHIC SCALE

CURVE TABLE

| RADIUS | ARC | ANGLE | CHORD BEARING |
|--------|-------|-------|---------------|
| 10.00 | 30.27 | 21.00 | 145°18'59" |
| 20.00 | 43.37 | 21.73 | 54°17'56" |
| 30.00 | 49.10 | 22.00 | 54°11'31" |
| 40.00 | 53.67 | 22.15 | 54°07'58" |
| 50.00 | 57.51 | 22.28 | 54°05'55" |
| 60.00 | 60.81 | 22.39 | 54°04'35" |
| 70.00 | 63.73 | 22.48 | 54°03'55" |
| 80.00 | 66.37 | 22.56 | 54°03'25" |
| 90.00 | 68.81 | 22.63 | 54°03'05" |
| 100.00 | 71.07 | 22.69 | 54°02'55" |
| 110.00 | 73.15 | 22.74 | 54°02'50" |
| 120.00 | 75.07 | 22.79 | 54°02'45" |
| 130.00 | 76.84 | 22.83 | 54°02'40" |
| 140.00 | 78.47 | 22.87 | 54°02'35" |
| 150.00 | 80.00 | 22.90 | 54°02'30" |
| 160.00 | 81.43 | 22.93 | 54°02'25" |
| 170.00 | 82.77 | 22.96 | 54°02'20" |
| 180.00 | 84.03 | 22.98 | 54°02'15" |
| 190.00 | 85.21 | 23.00 | 54°02'10" |
| 200.00 | 86.32 | 23.02 | 54°02'05" |
| 210.00 | 87.36 | 23.04 | 54°02'00" |
| 220.00 | 88.33 | 23.06 | 54°01'55" |
| 230.00 | 89.23 | 23.07 | 54°01'50" |
| 240.00 | 90.07 | 23.09 | 54°01'45" |
| 250.00 | 90.85 | 23.10 | 54°01'40" |
| 260.00 | 91.57 | 23.11 | 54°01'35" |
| 270.00 | 92.23 | 23.12 | 54°01'30" |
| 280.00 | 92.84 | 23.13 | 54°01'25" |
| 290.00 | 93.39 | 23.14 | 54°01'20" |
| 300.00 | 93.89 | 23.15 | 54°01'15" |
| 310.00 | 94.34 | 23.16 | 54°01'10" |
| 320.00 | 94.74 | 23.17 | 54°01'05" |
| 330.00 | 95.10 | 23.18 | 54°01'00" |
| 340.00 | 95.41 | 23.19 | 54°00'55" |
| 350.00 | 95.68 | 23.20 | 54°00'50" |
| 360.00 | 95.91 | 23.21 | 54°00'45" |
| 370.00 | 96.10 | 23.22 | 54°00'40" |
| 380.00 | 96.26 | 23.23 | 54°00'35" |
| 390.00 | 96.39 | 23.24 | 54°00'30" |
| 400.00 | 96.49 | 23.25 | 54°00'25" |
| 410.00 | 96.56 | 23.26 | 54°00'20" |
| 420.00 | 96.61 | 23.27 | 54°00'15" |
| 430.00 | 96.64 | 23.28 | 54°00'10" |
| 440.00 | 96.66 | 23.29 | 54°00'05" |
| 450.00 | 96.67 | 23.30 | 54°00'00" |
| 460.00 | 96.67 | 23.31 | 53°59'55" |
| 470.00 | 96.66 | 23.32 | 53°59'50" |
| 480.00 | 96.64 | 23.33 | 53°59'45" |
| 490.00 | 96.61 | 23.34 | 53°59'40" |
| 500.00 | 96.57 | 23.35 | 53°59'35" |
| 510.00 | 96.52 | 23.36 | 53°59'30" |
| 520.00 | 96.46 | 23.37 | 53°59'25" |
| 530.00 | 96.39 | 23.38 | 53°59'20" |
| 540.00 | 96.31 | 23.39 | 53°59'15" |
| 550.00 | 96.22 | 23.40 | 53°59'10" |
| 560.00 | 96.12 | 23.41 | 53°59'05" |
| 570.00 | 96.01 | 23.42 | 53°59'00" |
| 580.00 | 95.89 | 23.43 | 53°58'55" |
| 590.00 | 95.76 | 23.44 | 53°58'50" |
| 600.00 | 95.62 | 23.45 | 53°58'45" |



1053/403
 BOOK PAGE
 OFFICIAL RECORDS

WISE ESTATES
 PLAT BOOK 167
 PAGE 164 - 167

WISE ESTATES
 PLAT BOOK 7
 PAGE 164 - 167



BRITT SURVEYING
 LAND SURVEYORS AND MAPPERS

1426 WEST DUVAL STREET
 LAKE CITY, FLORIDA 32055

TELEPHONE: (386) 732-7163 FAX: (386) 732-3573 WORK ORDER # L-14385

THIS INSTRUMENT PREPARED BY
AND RETURN TO:
Osceola Land Title, Inc.
577 South 6th Street
Maccleenny, Florida 32063

Inst: 201912027017 Date: 11/20/2019 Time: 1:59PM
Page 1 of 1 B: 1399 P: 843, P. DeWitt Cason, Clerk of Court Colum
County, By: RD
Deputy Clerk

Parcel I.D. #: 24-45-16-03114-127
Grantee(s) SS#: s:

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

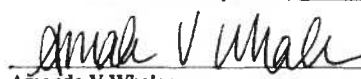
NOTICE OF COMMENCEMENT

STATE OF FLORIDA
CITY OF LAKE CITY, COUNTY OF COLUMBIA

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713.13, Florida Statutes, the following information is provided in this Notice of Commencement. This Notice shall be void and of no force and effect if construction is not commenced within ninety (90) days after recording.

1. Description of property: (Legal description of property, and street address if available)

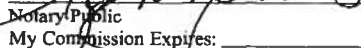
315 SW Arrowbend Dr, Lake City, FL 32024
Lot 27, Cannon Creek Place, according to the map or plat thereof, as recorded in Plat Book 8,
Page(s) 31 through 34, of the Public Records of Columbia County, Florida.
2. General description of improvement: construction of single family dwelling
3. Owner information:
 - a. Name and address:
Amanda Whalen, V and Chast Whalen
26831 County Rd 49, Branford, FL 32008
 - b. Interest in property: Fee Simple
 - c. Name and Address of Fee Simple Titleholder (if other than owner):
4. Contractor: (Name and Address)
Bradley Franks Construction, LLC
455 SW Deputy J Davis Ln, Lake City, FL 32024
Telephone Number: _____
5. Surety (if any):
 - a. Name and Address:
Telephone Number: _____
 - b. Amount of Bond \$ _____
6. Lender: (Name and Address)
First Federal Bank
4705 West US Hwy 90, Lake City, FL 32055
Telephone Number: _____
7. Persons within the State of Florida designated by Owner upon whom notice or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes: (Name and Address)
N/A
8. In addition to himself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes: (Name and Address)
First Federal Bank
4705 West US Hwy 90, Lake City, FL 32055
Telephone Number: _____
9. Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is specified) _____

 {SEAL}
Amanda V Whalen

 {SEAL}
Chast Whalen

Sworn to and subscribed before me this 15th day of November, 2019, by Amanda Whalen, V and Chast Whalen, who are personally known to me or who have produced

as identification.


Notary Public
My Commission Expires: _____

