

Mes M Swisher Jr Clerk of Courts, Columbia County, Florida

Permit Number:

Folio/Parcel ID#: 18-45-17-08466-116

Prepared By:

Neil Fleming - 17810 US 441 S. High Springs, FL 32644

Return To:

Neil Fleming - 17810 US 441 S. High Springs, FL 32644

NOTICE OF COMMENCEMENT

State of Florida

Columbia County

The undersigned hereby gives notice that improvement will be made to certain real property, as provided in this Notice of Commencement.

1. Description of property (legal description of the property, and street address if applicable)

133 SW Ballou Ct., Lake City, FL 32811; LOT 16, SADDLE OF THE SOUTH ESTATES S

2. General description of improvement

Remove existing roof and install shingles

3. Owner information or Lessee information if the Lessee contracted for the improvement

Name: Eugene Paul

Address: 133 SW Ballou Ct Lake City, FL 32811

Interest in Property: Owner

Name and address of the single affiliate (if different from Owner listed above)

Name:

Address:

4. Contractor

Name: Workman Construction Telephone Number: 352-472-3228

Address: 17810 US 441 S. High Springs, FL 32644

5. Surety (if applicable, a copy of the payment bond is attached)

Name:

Address:

6. Lender

Name:

Address:

7. Persons within the State of Florida designated by Owner upon whom notices or other documents

Name:

Address:

8. In addition to himself or herself, Owner designates the following to receive a copy of the Notice

Name:

Address:

9. Expiration date of notice of commencement (the expiration date will be 1 year from the date of

Address:

Telephone Number:

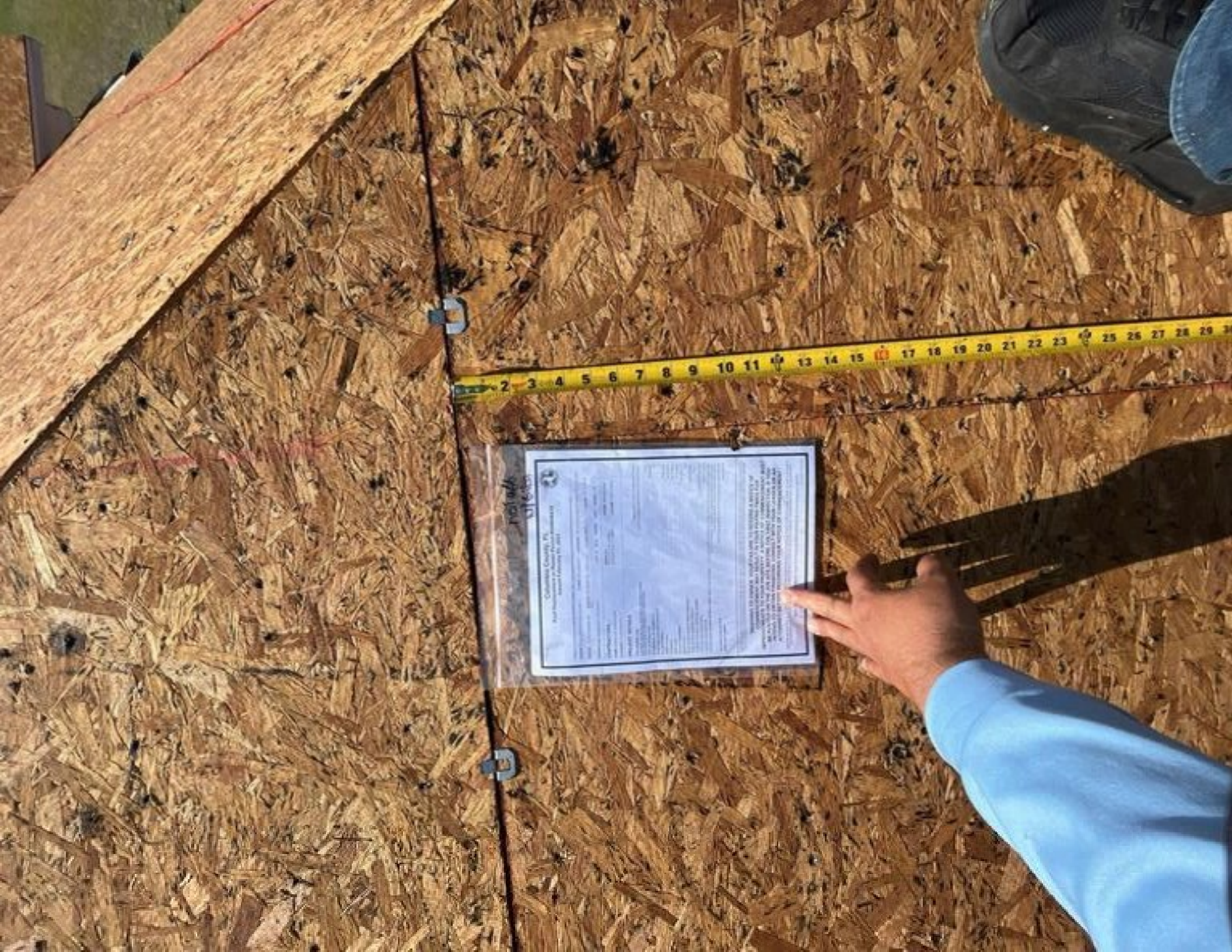
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION DATE OF THIS NOTICE SHALL BE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.11, TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE FILED WITH THE CLERK OF COURTS BEFORE THE FIRST INSPECTION IF YOU INTEND TO OBTAIN FINANCING, COMMENCEMENT OF WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Eugene Paul

Eugene Paul
17810 US 441 S. High Springs, FL 32644

4/18/2011



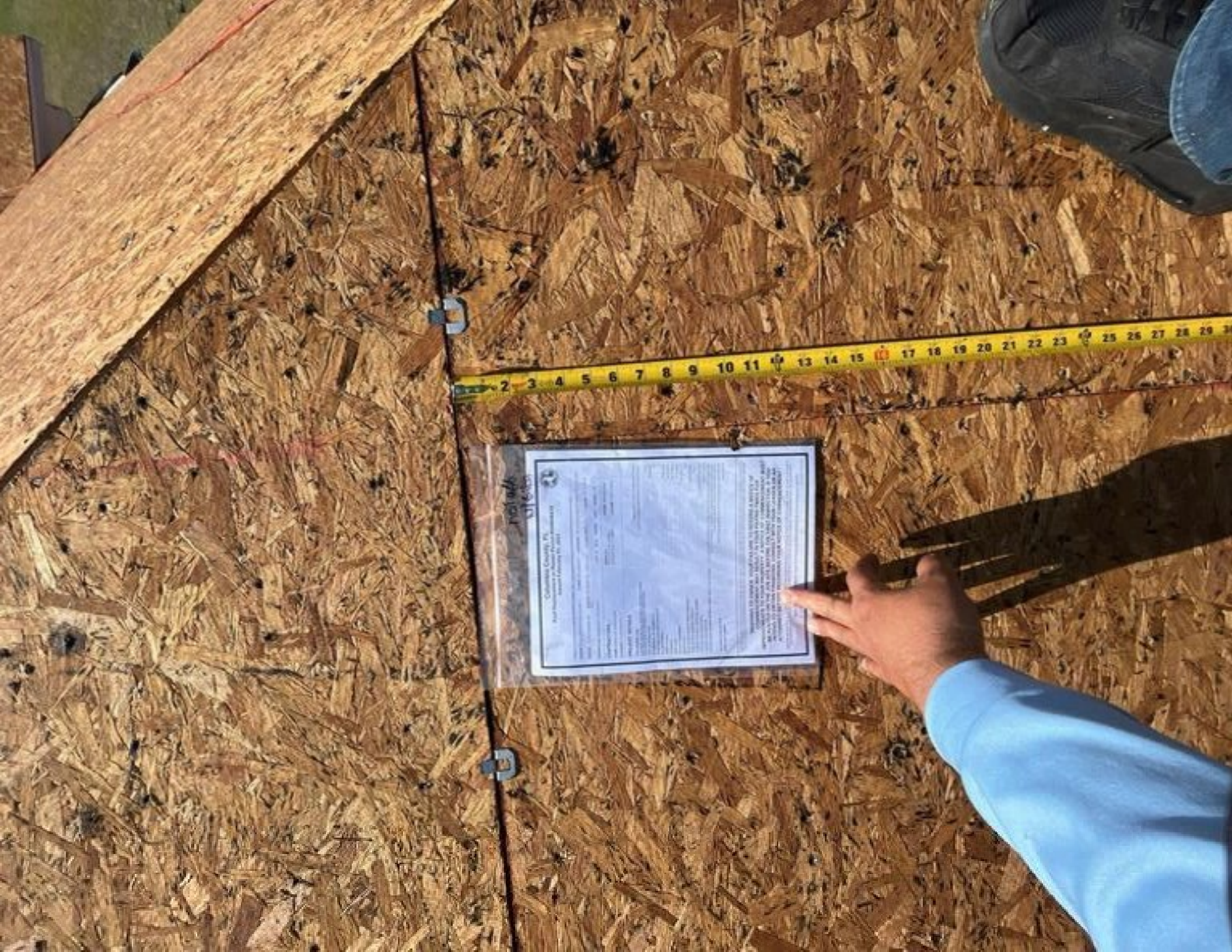


COLUMBIA COUNTY, FL
POST-CONSTRUCTION INSPECTION REPORT

Project Name: _____
Project Address: _____
Project Owner: _____
Inspector Name: _____
Inspector License No.: _____
Date of Inspection: _____

REMARKS TO OWNER: _____

[illegible]



Post-Construction Inspection Report

Columbia County, FL
Post-Construction Inspection Report

Project Name: _____
Project Address: _____
Project Owner: _____
Project Manager: _____
Inspector Name: _____
Inspector License Number: _____
Inspection Date: _____
Inspection Time: _____

Inspection Results:

1. Foundation: _____
2. Framing: _____
3. Roofing: _____
4. Siding: _____
5. Windows/Doors: _____
6. Electrical: _____
7. Plumbing: _____
8. HVAC: _____
9. Other: _____

Inspector Signature: _____
Inspector Title: _____
Inspector Company: _____

Project Manager Signature: _____
Project Manager Title: _____
Project Manager Company: _____

Notes: _____