

ATE 01/06/2004

Columbia County Building Permit**PERMIT**

This Permit Expires One Year From the Date of Issue

000021393

APPLICANT ALICE PEELER PHONE 755-2848

ADDRESS RT 3 BOX 118 LAKE CITY FL 32025

OWNER KEN & BRANDY WATSON PHONE 867-4995

ADDRESS P.O. BOX 1834 LAKE CITY FL 32056

CONTRACTOR PEELER POOLS PHONE _____

LOCATION OF PROPERTY 90W, TR ON CR 135, TL AT STOP SIGN, TR ON LAKE JEFFREY,
OAKHAVEN S/D, VEAR RIGHT, TO 90 DEGREE, HOUSE ON RT CORNER

TYPE DEVELOPMENT SWIMMING POOL ESTIMATED COST OF CONSTRUCTION 7000.00

HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT .00 STORIES _____

FOUNDATION CONC WALLS _____ ROOF PITCH _____ FLOOR _____

LAND USE & ZONING A-3 MAX. HEIGHT _____

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

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

PARCEL ID 12-3S-15-00167-202 SUBDIVISION OAKHAVEN

LOT 2 BLOCK A PHASE _____ UNIT 2 TOTAL ACRES _____

CPC057105

Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor Alice B Peeler

EXISTING _____ X03-230 _____ BK _____ RJ _____

Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: NOC ON FILE

Check # or Cash 2944**FOR BUILDING & ZONING DEPARTMENT ONLY**

(footer/Slab)

Temporary Power _____ Foundation _____ Monolithic _____
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 _____ Rough-in plumbing above slab and below wood floor _____
date/app. by _____ date/app. by _____

Electrical rough-in _____ Heat & Air Duct _____ Peri. beam (Lintel) _____
date/app. by _____ date/app. by _____ date/app. by _____

Permanent power _____ C.O. Final _____ Culvert _____
date/app. by _____ date/app. by _____ date/app. by _____

M/H tie downs, blocking, electricity and plumbing _____ Pool _____
date/app. by _____ date/app. by _____

Reconnection _____ Pump pole _____ Utility Pole _____
date/app. by _____ date/app. by _____ date/app. by _____

M/H Pole _____ Travel Trailer _____ Re-roof _____
date/app. by _____ date/app. by _____ date/app. by _____

BUILDING PERMIT FEE \$ 35.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00

MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ _____ WASTE FEE \$ _____

FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ _____ TOTAL FEE 85.00

INSPECTORS OFFICE [Signature] CLERKS OFFICE CTH

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 INCONVIENCE, 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

21393

122403

Application No. 0312-60

owner
Applicants Name & Address Jeffrey Pool 2 - Rt. 3, Box 118
Ken & Brandy Watson Phone 867-4995
PO Box 1834 Lake City
Applicant's Name & Address Reed's Pools Inc Phone 755-2848
Rt. 3 Box 118 Lake City FL 32025
Simple Owners Name & Address N/A Phone _____
Contractors Name & Address Reed's Pools / Ken & Brandy Watson Phone 755-2848
Rt. 3 Box 118 Lake City FL
Description of Property 90' W → (R) CL 135 - (L) a stop sign - (R) Lake Jeffrey Rd -
Old Haven subdivision - year (R) - follow to 900 curve -
house on (R) corner local lot 2
Parcel Identification No. 12-35-15-00167-202 Estimated Cost of Construction \$ 25,000
Type of Development Swimming Pool Const Number of Existing Dwellings on Property 1
Comprehensive Plan Map Category A-3 Zoning Map Category A-3
Building Height _____ Number of Stories _____ Floor Area _____ Total Acreage in Development _____
Distance From Property Lines (Set Backs) Front 100' Side 40' Rear 60' Street 100'
Zone N/A Certification Date _____ Development Permit N/A
Building Company Name & Address _____
Architect/Engineer Name & Address _____
Page Lenders Name & Address _____

certification is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has been commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction.

SWORNS AFFIDAVIT: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws regulating construction and zoning.

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Lynne Bell
For Agent (including contractor)

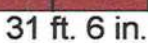
Lynne Bell
Contractor
CPC 057105
Contractor License Number

STATE OF FLORIDA
COUNTY OF COLUMBIA
I, _____, do hereby certify that the foregoing information is true and correct to (or affirmed) and subscribed before me
this _____ day of _____ by _____

STATE OF FLORIDA
COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me
this _____ day of _____ by _____



60+



Job Specifications	
Pool Area	535
Pool Perimeter	147
Shallow Depth	3.5
Deep Depth	6
Spa Area	0
Spa Perimeter	0
Face Tile	0
Coping	0
Deck Area	1443
Deck Perimeter	152
Patio Area	0
Patio Perimeter	0
Pool to Equip	0
Spa to Equip	0



NOTICE OF COMMENCEMENT

Inst:2003027648 Date:12/23/2003 Time:15:12

DC,P.DeWitt Cason,Columbia County B:1002 P:2938

STATE OF FLORIDA
COUNTY OF Columbia

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.

1. Description of Property: Lot 2, Block A, Oakhaven Unit II, a subdivision according to the plat thereof as recorded in Plat Book 5, pages 86-86A, of the public records of
2. General Description of Improvement: Swimming Pool & Enclosure Columbia Co.
3. Owner Information:
 - a. Name and Address: Kenneth A. Watson and Brandy Alexander
TBA North West Indian Springs DR Lake City, FL 32024
 - b. Interest in Property: Fee Simple
 - c. Name and Address of Fee Simple Titleholder (if other than owner): _____
4. Contractor (name and address): Peete Pools
RT 3 Box 118 Lake City, FL 32025
5. Surety:
 - a. Name and Address: N/A
 - b. Amount of Bond: _____
6. Lender (name and address): CNB National Bank
1875W Baya Drive P.O. Box 3239 Lake City FL 32056
7. Persons within the State of Florida designated by owner upon whom notices or other documents may be served as provided by Florida Statutes 713.13(1)(a)(7): N/A
8. In addition to himself, owner designates: N/A
9. to receive a copy of the Leinor's Notice as provided in Florida Statutes 713.13(1)(b).
Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is specified): _____

Kenneth A. Watson
Type Owner Name: Kenneth A. Watson

Brandy Alexander
Type Owner Name: Brandy Alexander

Sworn to and subscribed before me this 23 day of December, 2003.

Personally Known _____
Produced ID Drivers License
Did/Did Not Take an Oath _____

April D. Rogers
Type Notary's Name: April D. Rogers
Notary Public, State of Florida
Commission Expiry & Number: _____

