

This Permit Expires One Year From the Date of Issue

APPLICANTFRANK CEMBRUCHPHONE386.365.4403

ADDRESS455SW HAWTHORNE TERRACEFT. WHITEFL32038

OWNERMONIQUE & NATHAN GRIFFISPHONE386.752.6062

ADDRESS144SW THRASHER LANELAKE CITYFL32024

CONTRACTORFRANK CEMBRUCHPHONE386.365.4403

LOCATION OF PROPERTY47-S TO THRU COL. CITY TO THRASHER,TR AND IT'S 500' TO
M/H ON LEFT.

TYPE DEVELOPMENTREMODEL/ESTIMATED COST OF CONSTRUCTION0.00

HEATED FLOOR AREATOTAL AREAHEIGHTSTORIES

FOUNDATIONWALLSROOF PITCHFLOOR

LAND USE & ZONINGA-3MAX. HEIGHT

Minimum Set Back Requirments:STREET-FRONT30.00REAR25.00SIDE25.00

NO. EX.D.U.1FLOOD ZONEADEVELOPMENT PERMIT NO.

PARCEL ID15-5S-16-03623-021SUBDIVISIONHI DRI ACRES

LOT21BLOCKPHASEUNIT1TOTAL ACRES1.64

RR28281132

Culvert Permit No.Culvert WaiverContractor's License NumberApplicant/Owner/Contractor

EXISTINGX-07-366BLKJTHN

Driveway ConnectionSeptic Tank NumberLU & Zoning checked byApproved for IssuanceNew Resident

COMMENTS: REMODEL OF M/H NO CHARGE.TREE DAMAGE FROM STORM.
NOC ON FILE.

Check # or CashNO CHARGE

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary PowerFoundationMonolithicdate/app. bydate/app. bydate/app. by

Under slab rough-in plumbingSlabSheathing/Nailingdate/app. bydate/app. bydate/app. by

FramingRough-in plumbing above slab and below wood floordate/app. bydate/app. by

Electrical rough-inHeat & Air DuctPeri. beam (Lintel)date/app. bydate/app. bydate/app. by

Permanent powerC.O. FinalCulvertdate/app. bydate/app. bydate/app. by

M/H tie downs, blocking, electricity and plumbingPooldate/app. bydate/app. by

ReconnectionPump poleUtility Poledate/app. bydate/app. bydate/app. by

M/H PoleTravel TrailerRe-roofdate/app. bydate/app. bydate/app. by

BUILDING PERMIT FEE \$0.00CERTIFICATION FEE \$0.00SURCHARGE FEE \$0.00

MISC. FEES \$0.00ZONING CERT. FEE \$FIRE FEE \$0.00WASTE FEE \$

FLOOD DEVELOPMENT FEE \$FLOOD ZONE FEE \$CULVERT FEE \$TOTAL FEE0.00

INSPECTORS OFFICECLERKS OFFICE

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

For Office Use Only Application # 0709-23 Date Received 9/7/07 By G Permit # 26211
 Application Approved by - Zoning Official afs Date 9/11/07 Plans Examiner OK JTH Date 9-7-07
 Flood Zone A Development Permit - Zoning A-3 Land Use Plan Map Category A-3
 Comments NO CHARGE - tree damage from storm

☒ NOC ☐ EH ☐ Deed or PA ☒ Site Plan ☒ State Road Info ☐ Parent Parcel # ☐ Development Per

Name Authorized Person Signing Permit Frank Cembruch Fax 386-497-4220
 Address 455 SW Hawthorne Ter. Fort White, FL 32038 Phone 386-365-4403

Owners Name Monique & Nathan Griffiths Phone 386-752-6062

911 Address 144 SW Thrasher Lane Lake City, FL 32024

Contractors Name Frank Cembruch Phone 386-365-4403

Address 455 SW Hawthorne Ter Fort White, FL 32038

Fee Simple Owner Name & Address N/A
 Bonding Co. Name & Address N/A

Architect/Engineer Name & Address _____
 Mortgage Lenders Name & Address Origen Services Inc P.O. box 627 Amelia, OH 45102

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive En

Property ID Number 15-55-16-03623-021HX Estimated Cost of Construction 9450.00
 Subdivision Name Clay Elec. Lot 21 Block _____ Unit I Phase _____

Driving Directions Take SR 47 south thru Columbia city. go approx. 1 1/2 miles & turn
left on Thrasher Lane, go about 500 Ft. trailer on Lt.

Type of Construction Remodel of sub Number of Existing Dwellings on Property 1

Total Acreage 1.640 Lot Size _____ Do you need a - Culvert Permit or Culvert Waiver or Have an Existing

Actual Distance of Structure from Property Lines - Front _____ Side _____ Side _____ Rear _____

Total Building Height _____ Number of Stories _____ Heated Floor Area _____ Roof Pitch _____

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 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.

Owner Builder or Authorized Person by Notarized Letter _____ Contractor Signature Frank Cembruch

STATE OF FLORIDA
 COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me this 17th day of Sept 2007

Personally known _____ or Produced Identification DL



Contractors License Number RR 282811332
 Competency Card Number _____
 NOTARY STAMP/SEAL

Notary Signature Gale Tedder

Notary Signature _____ (Revised Sept. 2007)

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number 15-55-16-03623-021 HX

County Clerk's Office Stamp or Seal

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

1. Description of property (legal description): Lot 21 Hi-Dri Acres Unit 1. ORB 351-439,825-1746.
a) Street (Job) Address: 144 SW Thrasher Lane Lake City FL 32024
 2. General description of improvements: Repair of Roof, siding, ceiling.
 3. Owner Information
a) Name and address: Monique + Nathan Griffis
b) Name and address of fee simple titleholder (if other than owner) 144 SW Thrasher Ln Lake City, FL 32024
c) Interest in property _____
 4. Contractor Information
a) Name and address: Cembruch Construction LLC, 455 SW Hawthorne Ter. Fort White FL 32024
b) Telephone No.: 386-365-4403 Fax No. (Opt.) 386-497-4220
 5. Surety Information
a) Name and address: Florida Farm Bureau
b) Amount of Bond: _____
c) Telephone No.: 386-752-2545 Fax No. (Opt.) _____
 6. Lender
a) Name and address: Origen Services Inc PO Box 1627 Amelia, OH 45102
b) Phone No. 800-770-0749
 7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served:
a) Name and address: _____
b) Telephone No.: _____ Fax No. (Opt.) _____
 8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:
a) Name and address: _____
b) Telephone No.: _____
- Inst: 200712020363 Date: 9/7/2007 Time: 2:18 PM
14 DC, P. DeWitt Cason, Columbia County Page 1 of 1
9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified): _____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, 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 YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

STATE OF FLORIDA
COUNTY OF COLUMBIA

10. Monique M. Griffis
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager
Monique M. Griffis
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 5th day of September, 2007, by:
Monique Griffis as Owner (type of authority, e.g. officer, trustee, attorney
fact) for Monique Griffis (name of party on behalf of whom instrument was executed).

Personally Known ☒ OR Produced Identification _____ Type _____

Notary Signature

Janet Hostetler

Notary Stamp or Seal:



—AND—

11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Monique M. Griffis
Signature of Natural Person Signing (in line #10 above.)

Proposal

Page No.

of

Pages

CEMBRUCH CONSTRUCTION, LLC

New Const., Remodels, Renovations

455 S.W. Hawthorne Ter.

Fort White, FL 32038

(386) 497-4220 mobile (386) 365-4403

1310

PROPOSAL SUBMITTED TO <i>Nathan Griffiths</i>		PHONE <i>752-6062</i>	DATE <i>8-22-07</i>
STREET <i>144 S.W. Thrasher Lane</i>		JOB NAME	
CITY, STATE and ZIP CODE <i>Lake City, Fl. 32024</i>		JOB LOCATION	
ARCHITECT	DATE OF PLANS	JOB PHONE	

We hereby submit specifications and estimates for:

The Repair to the 28x49 Fleetwood mobile Home due to tree damage

(Outside) About 600 sf of roof decking & 9 trusses need to be replaced. recommend replacement of all shingles due to soft spots thru out. Tear off and replace with three tab shingles. 24' soffits & fascia, J-moulding around back door to be replaced. recommend replacement of all siding (vinyl) on back due to rips, tears, & wrinkles. And Raint on back door to be replaced. Remove tree & debris.

(Inside) About 300 sf of sheetrock needs to be installed. Utility, Kitchen, & hall ceilings all need to be re-popcorned to match. Fix main trunk line that is collapsed re-insulate w/R-19-Batt insulation. reinstall light & grilles. Paint ceiling that has been replaced. Paint ceiling in Master Bed & Bath with kills due to staining.

We Propose hereby to furnish material and labor — complete in accordance with above specifications, for the sum of:*Nine thousand Four Hundred Fifty & 00/100* dollars (\$ *9450.00*).

Payment to be made as follows:

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workman's Compensation Insurance.

Authorized
Signature _____Note: This proposal may be
withdrawn by us if not accepted within _____ days.

Acceptance of Proposal — The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Signature _____

Date of Acceptance: _____

Signature _____

Columbia County Property Appraiser

DB Last Updated: 8/2/2007

2007 Proposed Values

Tax Record

Property Card

Interactive GIS Map

New Super Homestead Taxable Value Calculator

Print

Parcel: 15-5S-16-03623-021 HX

Search Result: 1 of 1

Owner & Property Info

Owner's Name	GRIFFIS NATHAN W		
Site Address	THRASHER		
Mailing Address	144 SW THRASHER LANE LAKE CITY, FL 32024		
Use Desc. (code)	MOBILE HOM (000200)		
Neighborhood	15516.04	Tax District	3
UD Codes	MKTA02	Market Area	02
Total Land Area	1.640 ACRES		
Description	LOT 21 HI-DRI ACRES UNIT 1. ORB 351-439, 825-1746,		

GIS Aerial



Property & Assessment Values

Mkt Land Value	cnt: (2)	\$19,318.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (1)	\$41,893.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$61,211.00

Just Value		\$61,211.00
Class Value		\$0.00
Assessed Value		\$49,117.00
Exempt Value	(code: HX)	\$25,000.00
Total Taxable Value		\$24,117.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale Vlmp	Sale Qual	Sale RCode	Sale Price
5/2/1996	825/1746	WD	V	U	03	\$0.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SFR MANUF (000200)	1999	Vinyl Side (31)	1296	1296	\$41,893.00
Note: All S.F. calculations are based on exterior building dimensions.						

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
000200	MBL HM (MKT)	1.640 AC	1.00/1.00/.80/1.00	\$10,559.76	\$17,318.00
009945	WELL/SEPT (MKT)	1.000 UT - (.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00