	rilding Permit n Premises During Construction O00032075
APPLICANT RANDY THOMAS	PHONE 386.623.0097
ADDRESS POB 1216	LAKE CITY FL 32056
OWNER W. KEITH HUDSON	PHONE 386.397.3654
ADDRESS 309 SE OAKMONT STREET	LAKE CITY FL 32055
CONTRACTOR F. KENNY MOORE	PHONE 386.752.6565
LOCATION OF PROPERTY 90-E TO COUNTRY CLUB.TR TO	O OAKMONT,TL AND IT'S NEXT
TO LAST HOUSE ON L.	
TYPE DEVELOPMENT RECONNECTION/SFD EST	IMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL ARE	A HEIGHT STORIES
FOUNDATION WALLS R	OOF PITCH FLOOR
LAND USE & ZONING	MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT	REAR SIDE
NO. EX.D.U. 1 FLOOD ZONE	DEVELOPMENT PERMIT NO.
PARCEL ID 34-3S-17-07912-000 SUBDIVISION	N COUNTY CLUB ESTATES REPLAT
LOT II BLOCK 9 PHASE UNIT	TOTAL ACRES 0.24
ER0000691	X hand I The
Culvert Permit No. Culvert Waiver Contractor's License Num	ber Applicant/Owner/Contractor
EXISTING	JLW N
	g checked by Approved for Issuance New Resident
COMMENTS: RECONNECTION TO SFD.	
	Check # or Cash CASH
FOR BUILDING & ZONIN	G DEPARTMENT ONLY (footer/Slab)
Temporary Power Foundation	G DEPARTMENT ONLY (footer/Slab) Monolithic
Temporary Power Foundation date/app. by	G DEPARTMENT ONLY (footer/Slab) Monolithic date/app. by
Temporary Power Foundation date/app. by Under slab rough-in plumbing Slab date/app. by	G DEPARTMENT ONLY (footer/Slab) Monolithic
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"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."

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 THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.