

DATE 01/24/2005

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022722

APPLICANT MIKE TODD PHONE 755-4387
ADDRESS 129 NE COLBURN AVE LAKE CITY FL 32055
OWNER DAN & JUDY SHACKELFORD PHONE 755-4387
ADDRESS 550 SW SUWANNEE DOWNS DRIVE LAKE CITY FL 32055
CONTRACTOR MIKE TODD PHONE 755-4387
LOCATION OF PROPERTY 90W, TL ON BIRLEY, TR ON SUWANNEE DOWNS DRIVE, .75 MILES ON RIGHT
TYPE DEVELOPMENT SFD,UTILITY ESTIMATED COST OF CONSTRUCTION 108000.00
HEATED FLOOR AREA 2160.00 TOTAL AREA 2792.00 HEIGHT .00 STORIES 1
FOUNDATION CONC WALLS FRAMED ROOF PITCH 6/12 FLOOR SLAB
LAND USE & ZONING A-3/RSF-2 MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 33-3S-16-02431-105 SUBDIVISION SUWANNEE DOWNS
LOT 5 BLOCK PHASE UNIT TOTAL ACRES 5.00

CGC006209
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 05-1259-N BK RJ Y
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD,

Check # or Cash 10137

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power date/app. by Foundation date/app. by Monolithic date/app. by
Under slab rough-in plumbing date/app. by Slab date/app. by Sheathing/Nailing date/app. by
Framing date/app. by Rough-in plumbing above slab and below wood floor date/app. by
Electrical rough-in date/app. by Heat & Air Duct date/app. by Peri. beam (Lintel) date/app. by
Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by
M/H tie downs, blocking, electricity and plumbing date/app. by Pool date/app. by
Reconnection date/app. by Pump pole date/app. by Utility Pole date/app. by
M/H Pole date/app. by Travel Trailer date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$ 540.00 CERTIFICATION FEE \$ 13.96 SURCHARGE FEE \$ 13.96
MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$
FLOOD ZONE DEVELOPMENT FEE \$ CULVERT FEE \$ TOTAL FEE 617.92

INSPECTORS OFFICE CLERKS 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 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

617.92

Revised 9-23-04

For Office Use Only	Application # <u>0501-10</u>	Date Received <u>1/4/05</u>	By <u>JW</u>	Permit # <u>122722</u>
Application Approved by - Zoning Official <u>BLK</u>		Date <u>1/7/05</u>	Plans Examiner	Date
Flood Zone <u>X</u>	Development Permit <u>N/A</u>	Zoning <u>A-3</u>	Land Use Plan Map Category <u>A-3</u>	<u>RES, Low Density</u>
Comments <u>Final Plan</u>				

Applicants Name Mike Todd Phone 386 755 4387
Address 129 NE Colburn Ave, Lake City, FL 32055
Owners Name Dan & Judy Shackelford Phone _____
911 Address 550 SW Suwannee Downs Drive, Lake City, FL 32024
Contractors Name Mike Todd Phone 386 755 4387
Address 129 NE Colburn Ave, Lake City, FL 32055
Fee Simple Owner Name & Address N/A
Bonding Co. Name & Address N/A
Architect/Engineer Name & Address N/A
Mortgage Lenders Name & Address First Federal Savings, Lake City, FL
Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Energy
Property ID Number R02431-105 Estimated Cost of Construction \$120,000
Subdivision Name Suwannee Downs Lot 5 Block _____ Unit _____ Phase _____
Driving Directions Hwy 90 West to Birley - Turn Left - Travel 2.25 miles - Turn Right into Suwannee Downs - Travel .75 miles - Lot on Right
Type of Construction residential Number of Existing Dwellings on Property 0
Total Acreage 5 Lot Size _____ Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
Actual Distance of Structure from Property Lines - Front 420' Side 70, 260' Side _____ Rear 60
Total Building Height 18.25' Number of Stories 1 Heated Floor Area 2160 Roof Pitch 6

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.

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.

[Signature]
Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me
this _____ day of _____ 20____.

Personally known _____ or Produced Identification _____

[Signature]
Contractor Signature
Contractors License Number CGC 006269
Competency Card Number _____
NOTARY STAMP/SEAL

Notary Signature

Compliance with Method B Chapter 6 of the Florida Energy Efficiency Code may be demonstrated by the use of Form 600B for single and multifamily residences of 3 stories or less in height, and additions to existing residential buildings. To comply, a building must meet or exceed all of the energy efficiency prescriptives in any one of the prescriptive component packages and comply with the prescriptive measures listed in Table 6B-1 of this form. An alternative method is provided for additions of 600 square feet or less by use of Form 600C. If a building does not comply with this method, it may still comply under other sections in Chapter 6 of the Code.

PROJECT NAME: <u>Shackelford</u>	BUILDER: <u>MIKE TODD</u>
AND ADDRESS: <u>550 SW Suwannee Downs Dr</u>	PERMITTING OFFICE: _____
<u>Lake City FL 32674</u>	CLIMATE ZONE: 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>
OWNER: <u>Dan & Judy Shackelford</u>	PERMIT NO.: <u>22722</u>
	JURISDICTION NO.: <u>221000</u>

GENERAL DIRECTIONS

1. New construction including additions which incorporates any of the following features cannot comply using this method: steel stud walls, single assembly roof/ceiling construction, or skylights or other non-vertical roof glass.
2. Choose one of the component packages "A" through "E" from Table 6B-1 by which you intend to comply with the Code. Circle the column of the package you have chosen.
3. Fill in all the applicable spaces of the "To Be Installed" column on Table 6B-1 with the information requested. All "To Be Installed" values must be equal to or more efficient than the required levels.
4. Complete page 1 based on the "To Be Installed" column information.
5. Read "Minimum Requirements for All Packages", Table 6B-2 and check each box to indicate your intent to comply with all applicable items.
6. Read, sign and date the "Prepared By" certification statement at the bottom of page 1. The owner or owner's agent must also sign and date the form.

1. Compliance package chosen (A-F)
2. New construction or addition
3. Single family detached or Multifamily attached
4. If Multifamily—No. of units covered by this submission
5. Is this a worst case? (yes / no)
6. Conditioned floor area (sq. ft.)
7. Predominant eave overhang (ft.)
8. Glass type and area :
 - a. Clear glass
 - b. Tint, film or solar screen
9. Percentage of glass to floor area
10. Floor type, area or perimeter, and insulation:
 - a. Slab on grade (R-value)
 - b. Wood, raised (R-value)
 - c. Wood, common (R-value)
 - d. Concrete, raised (R-value)
 - e. Concrete, common (R-value)
11. Wall type, area and insulation:
 - a. Exterior: 1. Masonry (Insulation R-value)
2. Wood frame (Insulation R-value)
 - b. Adjacent: 1. Masonry (Insulation R-value)
2. Wood frame (Insulation R-value)
12. Ceiling type, area and insulation:
 - a. Under attic (Insulation R-value)
 - b. Single assembly (Insulation R-value)
13. Air Distribution System: Duct insulation, location
Test report (attach if required)
14. Cooling system
(Types: central, room unit, package terminal A.C., gas, none)
15. Heating system:
(Types: heat pump, elec. strip, nat. gas, L.P. gas, gas h.p., room or PTAC, none)
16. Hot water system:
(Types: elec., nat. gas, L.P. gas, solar, heat rec., ded. heat pump, other, none)

Please Print

CK

1. <u>A</u>	
2. <u>NEW</u>	
3. <u>SINGLE</u>	
4. <u>N/A</u>	
5. <u>NO</u>	
6. <u>2160</u>	
7. <u>2.0'</u>	
	Single Pane Double Pane
8a. _____ sq. ft.	<u>242</u> sq. ft.
8b. _____ sq. ft.	_____ sq. ft.
9. <u>11</u> %	
10a. R= <u>0</u>	_____ lin. ft.
10b. R= _____	_____ sq. ft.
10c. R= _____	_____ sq. ft.
10d. R= _____	_____ sq. ft.
10e. R= _____	_____ sq. ft.
11a-1 R= _____	_____ sq. ft.
11a-2 R= <u>13</u>	<u>1600</u> sq. ft.
11b-1 R= _____	_____ sq. ft.
11b-2 R= _____	_____ sq. ft.
12a. R= <u>30</u>	<u>2160</u> sq. ft.
12b. R= _____	_____ sq. ft.
13. R= <u>6</u>	
14a. Type: <u>Central</u>	
14b. SEER/EER: <u>12.0</u>	
14c. Capacity: <u>3.5 TONS</u>	
15a. Type: <u>Heat Pump</u>	
15b. HSPF/COP/AFUE: _____	
15c. Capacity: <u>36K</u>	
16a. Type: <u>Elect.</u>	
16b. EF: <u>.88</u>	

I hereby certify that the plans and specifications covered by the calculation are in compliance with the Florida Energy Code.

PREPARED BY: [Signature] DATE: 1-4-05

OWNER AGENT: [Signature] DATE: 1-4-05

Review of plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed, this building will be inspected for compliance in accordance with Section 553.908, F.S.

BUILDING OFFICIAL: _____ DATE: _____

Permit Application Number 05-1259N

Scale: 1 inch = 50 feet.



1 of 5.05 Acres

Shackelford

~~The Plan submitted by~~

Plan Approved

By Karl Gork

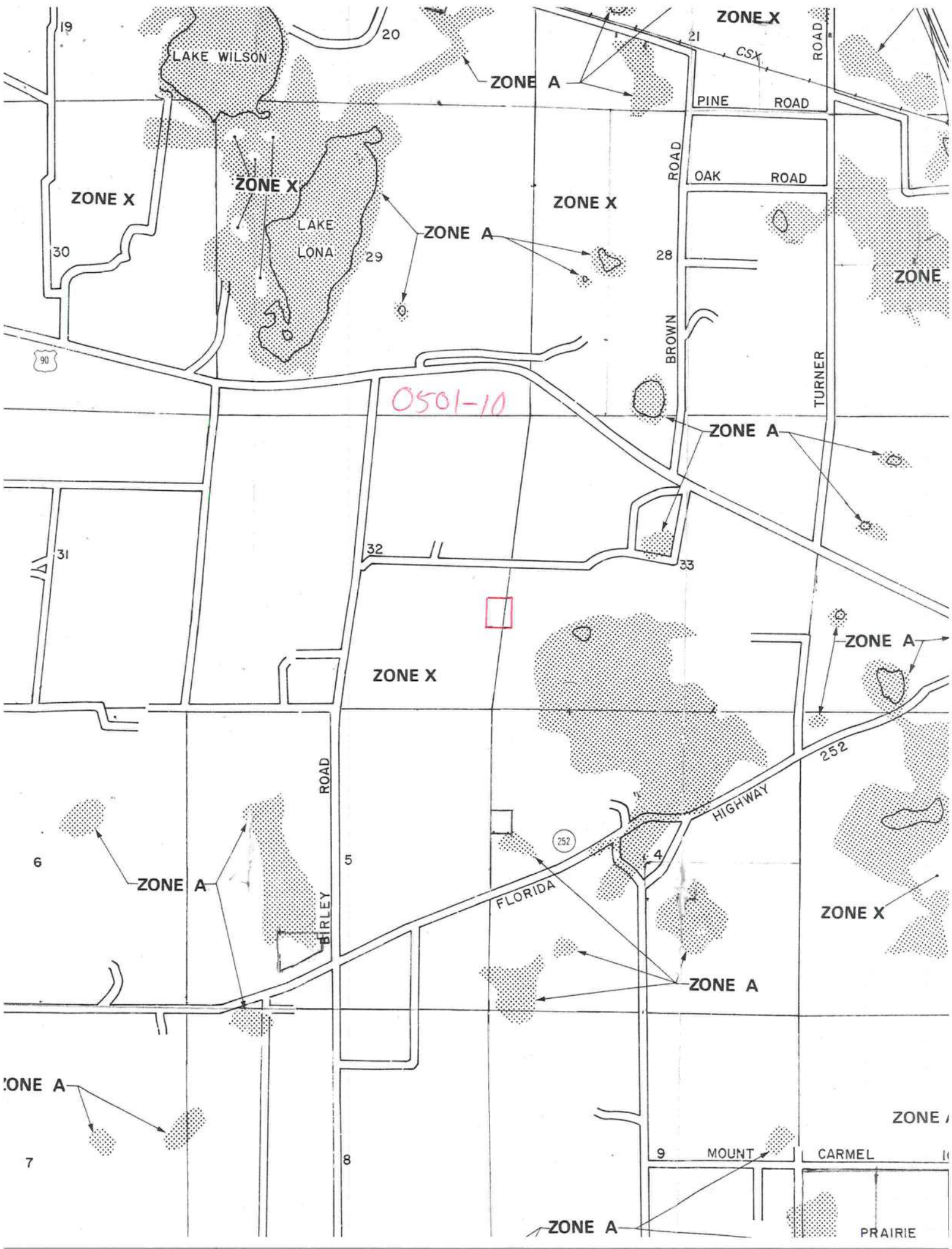
Not Approved

MASTER CONTRACTOR

Date _____

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



COLUMBIA COUNTY 9-1-1 ADDRESSING

263 NW Lake City Ave. * P. O. Box 2949 * Lake City, FL 32056-2949
PHONE: (386) 752-8787 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide 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 assigning 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 Service 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 ISSUED: January 3, 2005

ENHANCED 9-1-1 ADDRESS:

550 SW SUWANNEE DOWNS DR (LAKE CITY, FL 32024)

Addressed Location 911 Phone Number: NOT AVAIL.

OCCUPANT NAME: NOT AVAIL.

OCCUPANT CURRENT MAILING ADDRESS: _____

PROPERTY APPRAISER MAP SHEET NUMBER: 22

PROPERTY APPRAISER PARCEL NUMBER: 32-3S-16-02431-105

Other Contact Phone Number (If any): _____

Building Permit Number (If known): _____

Remarks: LOT 5 SUWANNEE RIVER DOWNS S/D

Address Issued By: _____

Columbia County 9-1-1 Addressing Department

COLUMBIA COUNTY
9-1-1 ADDRESSING
APPROVED

Prepared by and return to:
Susan Shattler

Home Town Title of North Florida
2744 US Highway 90 West
Lake City, FL 32055
386-754-7175
File Number: 2004-560

Inst:2004019385 Date:08/23/2004 Time:12:05
Doc Stamp-Deed : 297.50
JK DC, P. DeWitt Cason, Columbia County B:1024 P:429

[Space Above This Line For Recording Data]

Warranty Deed

This Warranty Deed made this 18th day of August, 2004 between **Rod Bowdoin** whose post office address is **P.O. Box 2201, Lake City, FL 32056**, grantor, and **Daniel P. Shackelford and Judith A. Shackelford, husband and wife** whose post office address is **180 SW Woodview, Lake City, FL 32024**, grantee:

(Whenever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, trusts and trustees)

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in **Columbia County, Florida** to-wit:

**LOT 5, OF SUWANNEE RIVER DOWNS, A SUBDIVISION ACCORDING TO PLAT THEREOF
RECORDED IN PLAT BOOK 5 PAGES 91-91A PUBLIC RECORDS OF COLUMBIA COUNTY,
FLORIDA.**

Parcel Identification Number: R02431-105

Grantor warrants that at the time of this conveyance, the subject property is not the Grantor's homestead within the meaning set forth in the constitution of the State of Florida, nor is it contiguous to or a part of homestead property.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to **December 31, 2003**.

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

DoubleTime®

Signed, sealed and delivered in our presence:

Tammy I. Spivey
Witness Name: Tammy I. Spivey

Susan Shattler
Witness Name: Susan Shattler

Rod Bowdoin (Seal)
Rod Bowdoin

State of Florida
County of Columbia

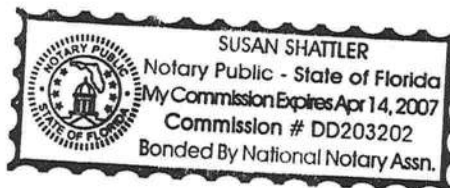
The foregoing instrument was acknowledged before me this 19 day of August, 2004 by Rod Bowdoin, who ☐ is personally known or ☒ has produced a driver's license as identification.

[Notary Seal]

Susan Shattler
Notary Public

Printed Name: Susan Shattler

My Commission Expires: _____



Inst:2004019385 Date:08/23/2004 Time:12:05
Doc Stamp-Deed : 297.50
_____DC,P.Dewitt Cason,Columbia County B:1024 P:430

THIS INSTRUMENT WAS PREPARED BY:
FIRST FEDERAL SAVINGS BANK OF FLORIDA
4705 WEST U.S. HIGHWAY 90
P.O. BOX 2029
LAKE CITY, FLORIDA 32056

Inst:2005001435 Date:01/21/2005 Time:12:58
SMK DC,P.DeWitt Cason,Columbia County B:1035 P:2859

PERMIT NO. _____

TAX FOLIO NO. _____

NOTICE OF COMMENCEMENT

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 5, of SUWANNEE RIVER DOWNS, a subdivision according to the plat thereof as recorded in Plat Book 5, Pages 91-91A of the public records of Columbia County, Florida.

2. General description of improvement: Construction of Dwelling

3. Owner information:

a. Name and address: Daniel P. Shackelford and Judith A. Shackelford
123 NW Silver Glen, Lake City, FL 32055

b. Interest in property: Fee Simple

c. Name and address of fee simple title holder (if other than Owner): NONE

4. Contractor (name and address): Mike Todd Construction
129 NE Colburn Ave., Lake City, FL 32055

5. Surety:

a. Name and address: _____

b. Amount of bond: _____

STATE OF FLORIDA, COUNTY OF COLUMBIA
I HEREBY CERTIFY, that the above and foregoing
is a true copy of the original filed in this office.
P. DEWITT CASON, CLERK OF COURTS

By: Maud Keen
Deputy Clerk

6. Lender: **FIRST FEDERAL SAVINGS BANK OF FLORIDA**
4705 WEST U.S. HIGHWAY 90
P. O. BOX 2029
LAKE CITY, FLORIDA 32056

7. Persons within the State of Florida designated by Owner upon whom notices or other document may be served as provided by Section 713.13 (1) (a) 7., Florida Statutes: NONE

8. In addition to himself, Owner designates **PAULA HACKER of FIRST FEDERAL SAVINGS BANK OF FLORIDA, 4705 West U.S. Highway 90 / P. O. Box 2029, Lake City, Florida 32056** to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.

9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified).

Daniel P. Shackelford
Borrower Name

Judith Ann Shackelford
Co-Borrower Name

The foregoing instrument was acknowledged before me this 18th day of January, 2005, by DANIEL P. & JUDITH A. SHACKELFORD, who is personally known to me or who has produced driver's license for identification.

Terry McDavid
Notary Public

My Commission Expires: _____



22722



FOUNDED 1949

CORPORATE HEADQUARTERS:

P.O. BOX 5369
116 N.W. 16TH AVENUE
GAINESVILLE, FL 32602-5369(352) 376-2001
FAX (352) 376-2791

SCIENTIFIC PEST CONTROL DIRECTED BY GRADUATE ENTOMOLOGISTS

Complete Pest Control Service
Member Florida & National Pest Control Associations11326
DAN SHACKELFORDReply to: 536 SE Baya Dr
Lake City, FL 32025
Phone (386) 752-1703 Fax (386) 752-0171

TERMITE TREATMENT CERTIFICATION

Owner:	Permit Number:
DAN SHACKELFORD	22722
Lot:	Block:
Subdivision:	Street Address:
	550SW SUWANNEE DOWNS DR
City:	County:
Lake City	Columbia
General Contractor:	Area Treated:
MIKE TODD CONSTRUCTION	EXTERIOR OF FOUNDATION
Date:	Time:
09/19/05	2:00 PM
Name of applicator:	Applicator ID Number:
JAMES D PARKER	JE55238
Product Used: Active Ingredient: % Concentration	Number of gallons used:
Dursban TC: Chlorpyrifos: 0.5%	30
Method of termite prevention treatment: Soil Treatment	

The building has received a complete treatment for the prevention of subterranean termites. Treatment is in accordance with rules and laws established by the Florida Department of Agriculture and Consumer Services.
This form is proof of complete treatment for Certificate of Occupancy or Closing.

THIS IS PROOF OF WARRANTY

Warranty and Treatment Certifications Have Been Issued.

Authorized Signature:	Date:
Kathi Schmidt-Savi	9-19-05

BRANCHES:

• Crystal River • Daytona Beach • Ft. Walton Beach • Jacksonville South • Jacksonville West • Lake City • Milton • Ocala • Orlando • Palatka • Panama City • Pensacola • Starke • St. Augustine • Tallahassee • Winter Haven • Leesburg • Kissimmee •

UNIVERSAL

ENGINEERING SCIENCES

Consultants In: Geotechnical Engineering •
Environmental Sciences • Construction Materials Testing

4475 S.W. 35th Terrace • Gainesville, Florida 32608 • (352) 372-3392

REPORT ON IN-PLACE DENSITY TESTS

22722

CLIENT: Mike Todd Const Permit # 600027722

PROJECT: Swansee Downs
(550 SL) ~~Swansee~~ Swansee Downs Dr.

AREA TESTED: fill & prop bldg pad & found

COURSE: 116 DEPTH OF TEST: 0-1'

TYPE OF TEST: ASTM D 2922 DATE TESTED: 2.3.05

NOTE: The below tests DO ~~DO NOT~~ meet the minimum 95 % compaction requirements of maximum density.

REMARKS: _____

[illegible]

TECH. DM

4404

COLUMBIA COUNTY, FLORIDA

OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 33-3S-16-02431-105

Building permit No. 000022722

Use Classification SFD, UTILITY

Fire: .00

Permit Holder MIKE TODD

Waste: .00

Owner of Building DAN & JUDY SHACKELFORD

Total: .00

Location: 550 SW SUWANNEE DOWNS(SUWANNEE DOWNS, LOT 5)

Date: 09/19/2005

Harry Bieker

Building Inspector



POST IN A CONSPICUOUS PLACE
(Business Places Only)

Applicator	White	Permit File - C
Notice		
Applicator	Florida Pest Cont	
Address	550 SW Suwannee	
City	L.C.	
Site Location	Subdivision	
Lot#	Block#	Per
Address	550 SW Suwannee	
AREAS TREATED		
Area Treated	Date	
Main Body	2/19/05	
Patio/s #		
Stoop/s #		
Porch/s #		
Brick Veneer		
Extension Walls		
A/C Pad		
Walk/s #		
Exterior of Foundation		
Driveway Apron		
Out Building		
Tub Trap/s		
(Other)		
Name of Product Applied	Exterior	
Remarks	Notes	