DATE 03/09/2015 Columbia County Bu This Permit Must Be Prominently Posted of	
APPLICANT DAN SMITH ADDRESS 7635 CACHE COURT	PHONE 904.535.3793  KEYSTONE HEIGHTS FL 32616
OWNER LESLEY PERRINE	PHONE 386.752.3012
ADDRESS 428 SW SLASH LANE	LAKE CITY FL 32024
CONTRACTOR PETER CAFARO	PHONE 904.535.3793
LOCATION OF PROPERTY 90-W TO SR.247-S,TL TO MONK	TL TO LONG LEAF, TR TO SLASH, TL
AND IT'S THE 2ND HOUSE ON I	₹.
TYPE DEVELOPMENT BATHROOM REMODEL EST	IMATED COST OF CONSTRUCTION 12915.00
HEATED FLOOR AREA TOTAL AREA	A HEIGHT STORIES
FOUNDATION WALLS R	OOF PITCH FLOOR
LAND USE & ZONING RSF-2	MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT	REAR SIDE
NO. EX.D.U. 1 FLOOD ZONE X	DEVELOPMENT PERMIT NO.
PARCEL ID 16-4S-16-03048-017 SUBDIVISION FOREST COUNTRY	
LOT 2 BLOCK PHASE 1 UNIT	TOTAL ACRES
CGC1508417	1 LEAR
Culvert Permit No. Culvert Waiver Contractor's License Num EXISTING BLK	Applicant/Owner/Contractor TC
	g checked by Approved for Issuance New Resident
COMMENTS: NOC ON FILE. NO EXTERIOR SQUARE FEET.	
	Check # or Cash CASH REC'D.
FOR BUILDING & ZONIN	G DEPARTMENT ONLY
FOR BUILDING & ZONIN Temporary Power Foundation	G DEPARTMENT ONLY (footer/Slab)  Monolithic
Temporary Power Foundation	G DEPARTMENT ONLY (footer/Slab)  Monolithic date/app. by
Temporary Power Foundation  date/app. by  Under slab rough-in plumbing Slab	G DEPARTMENT ONLY (footer/Slab)  Monolithic date/app. by  Sheathing/Nailing
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**PERMIT** 

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.