DATE 05/17/2017 Columbia County Bt This Permit Must Be Prominently Posted of	uilding Permit	PERMIT
		000035328
APPLICANT RICK JOHNSON ADDRESS 3501 NW 97TH BLVD	PHONE 352.332.76	
OWNER MICHAEL & JENNIFER SEXTON	GAINESVILLE	FL 32606
	PHONE 850.276.93	90.5044 SOME PROPERTY.
ADDRESS 1050 SW DYAL AVENUE CONTRACTOR MICHAEL CANTO	LAKE CITY	FL 32024
	PHONE 352.332.76	55
LOCATION OF PROPERTY 90-W TO C-341,TL TO DYAL ON CENTRAL CHURCH.	RIGHT JUST BEFORE CHRIST	
TYPE DEVELOPMENT SWIMMING POOL EST	IMATED COST OF CONSTRUCTIO	N 33200.00
HEATED FLOOR AREA TOTAL ARE.	A HEIGHT	STORIES
FOUNDATION WALLS R	OOF PITCH	FLOOR
LAND USE & ZONING A-3	MAX. HEIGHT	
Minimum Set Back Requirments: STREET-FRONT	REAR 30.00	SIDE 25.00
NO. EX.D.U. 1 FLOOD ZONE A	DEVELOPMENT PERMIT NO.	
PARCEL ID 27-4S-16-03218-007 SUBDIVISION	N C	
LOT BLOCK PHASE UNIT	TOTAL ACRES	7.75
CPC)457306	(mag	
Culvert Permit No. Culvert Waiver Contractor's License Num	ber Applicant/Own	ner/Contractor
EXISTING 17-0294-E BMS	TC N	
Driveway Connection Septic Tank Number LU & Zoning checker	ed by Approved for Issuance New	Resident Time/STUP No.
COMMENTS: NOC ON FILE.		
	Check # or	Cash 51181
FOR BUILDING & ZONIN	G DEPARTMENT ONLY	(footer/Slab)
Temporary Power Foundation	Monolithic	(i) (ii)
date/app. by		
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Under slab rough-in plumbing Slab	Sheathi	date/app. by ng/Nailing
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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.