DATE 12/09	0/2004		a County Building Permit PERMIT							
ADDI ICANT	AI DEDT	Expires One Year From the Date of Issue 000022579 PHONE 961-9728								
APPLICANT ADDRESS	ALBERT 283	SW JUNE GLEN	LAKE CITY FL 32024							
OWNER		COHOON	PHONE 961-9728							
ADDRESS	283	SW JUNE GLEN	LAKE CITY FL 32024							
CONTRACTO		NER BUILDER	PHONE 961-9728							
LOCATION OF PROPERTY 47S, TL ON WESTER ROAD, TL ON FINLEY LITTLE, , TL ON PANDORA										
TL ON JUNE GLEN, 5TH ON LEFT										
TYPE DEVELOPMENT REMODEL OF SFD ESTIMATED COST OF CONSTRUCTION .00										
HEATED FLO	OR AREA		TOTAL AREA HEIGHT .00 STORIES							
FOUNDATION	ν	WALLS	ROOF PITCH FLOOR							
LAND USE &	ZONING	A-3	MAX. HEIGHT							
Minimum Set I	Back Requi	rments: STREET-FR	ONT 30.00 REAR 25.00 SIDE 25.00							
NO. EX.D.U. 1 FLOOD ZONE NA DEVELOPMENT PERMIT NO.										
PARCEL ID	06-5S-17-	-09136-002	SUBDIVISION TINA							
LOT 22	BLOCK	PHASE	UNIT TOTAL ACRES							
			1000000							
Culvert Permit 1	No.	Culvert Waiver Cont	tractor's License Number Applicant/Owner/Contractor							
EXISTING		X04-0307	BK HD N							
Driveway Conn	ection	-	LU & Zoning checked by Approved for Issuance New Resident							
COMMENTS: NO CHARGE, STORM DAMAGE, NOC ON FILE										
COMMENTS:	NO CHAI	RGE, STORM DAMAGE	E, NOC ON FILE							
COMMENTS:	NO CHA	RGE, STORM DAMAGE	E, NOC ON FILE							
COMMENTS:	NO CHA	RGE, STORM DAMAGE	Check # or Cash							
COMMENTS:	NO CHA		Check # or Cash							
COMMENTS: Temporary Pow			Check # or Cash							
1			Check # or Cash DING & ZONING DEPARTMENT ONLY (footer/Slab)							
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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.

Columbia County Building Permit Application For Office Use Only Application # 841-63 Date Received 115/04 Date 02 12.64 Plans Examiner HD Application Approved by - Zoning Official 62 Flood Zone MA Development Permit MA Zoning A-3 Land Use Plan Map Category Comments Phone Owners Name OWNER Address Fee Simple Owner Name & Address Bonding Co. Name & Address_ Architect/Engineer Name & Address Mortgage Lenders Name & Address BANK OF MERICA 32005 Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Élec. -Progressive Energy Property ID Number 06-55-17-09136-002 Estimated Cost of Construction **Subdivision Name** Driving Directions _ Pan dorA JUNE Number of Existing Dwellings on Property_ Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Acreage Lot Size Actual Distance of Structure from Property Lines - Front 75 Side Heated Floor Area 1160 SF Roof Pitch Total Building Height __ Number of Stories 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 COMMENCMENT 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 Agent (Including Contractor) **Contractor Signature** Contractors License Number Competency Card Number STATE OF FLORIDA **NOTARY STAMP/SEAL COUNTY OF COLUMBIA** Sworn to (or affirmed) and subscribed before me BARBARA DOCANAN MY COMMISSION I DD24 2th day of November 20 EXPIRES Novary Signature Personally known____or Produced Identification

DISCLOSURE STATEMENT

FOR OWNER/BUILDER WHEN ACTING AS THER OWN CONTRACTOR AND CLAIMING EXEMPTION OF CONTRACTOR LICENSING REQUIREMENTS IN ACCORDANCE WITH FLORIDA STATUTES, ss. 489.103(7).

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$25,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. You may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

	TYPE OF CONSTRUCTION			
₩ Single Family Dwelling	() Two-Family Residence			
() Farm Outbuilding	() Other			
() New Construction	() Addition, Alteration, Modification or other Improvement			
NEW C	ONSTRUCTION OR IMPROVEMENT			
provided for in Florida Statutes ss.48	, have been advised of the above disclosure statement sing as an owner/builder. I agree to comply with all requirements 89.103(7) allowing this exception for the construction permitted by Sumber			
Albert M. Choen Signature	1/-/5-04 Date			
	FOR BUILDING USE ONLY			
Florida Statutes ss 489.103(7).	owner/builder has been notified of the disclosure statement in			
Date 11-15-04 Building	Official/Representative White			
	· ·			

NOTICE OF COMMENCEMENT

TAX FOLIO NO. _____

PERMIT NO.

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: (legal description of the property and street address if available) 06-55-17 0100/010-6
(283 SW JUNE GLN) COMM NW COR OF SW Y4 OF NE
Run E 60' TO E R/W OFRS. Run S 442, E888' FOB POB, CONT E 222, S 196 TON LINE
2. General description of improvement: FLOOD DAMAGE REPLACEMENT JUNE CH. W
3. Owner information:
a) Name and address: ALBERT & LORETTA COHOON 2835W JUNEGLA
b) Interest in property: BANK OF AMERICA
c) Name and address of fee simple titleholder (if other than owner):
4. Contractor (Name and address) ALBERT D. COHOGN
283 SW JUNE GIN, LAKE CITY 32024
5. Surety:
a) Name and address: Inst:2004025338 Date:11/12/2004 Time:12:32
b) Amount of bond: DC,P. DeWitt Cason, Columbia County B: 1030 P: 1391
6. Lender (Name and address):
7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1) (a) (7)., Florida Statutes (Name and address):
8. In addition to himself, Owner designates of to receive a copy of the Lien or Notice as provided in Section 713.13 (1) (b), Florida Statutes.
9. Expiration of date of notice on commencement (the expiration date is 1 year from the date of recording unless a different date is specified): (Signature of Owner)
STATE OF FLORIDA COUNTY OF Columbia The foregoing instrument was acknowledged before me this 12th day of as identification and who did take an oath. Signature of Notary Produced My commission expires: 10 03 06 Print Name: Title: F. VONCILE DOW MY COMMISSION # DD 154929
EXPIRES: October 3, 2006 Bonded Thru Notary Public Underwriters

16.				
ITEMIZE!	LIST 1	FOR REPLACE	EMENT	
1	(2)	(0) 10 (3)	0 0=	
1. INTERIOR DOORS		(2) BATHS (3)	CLOSETS (1) FUR	NACE
2. EXTERIOR DOORS		0 - 41')	C 1 3 1 7 2	
3. 75% OF DRYW		DELOW 7)		1. +
4. (2) BATHROOM				
5. ALL FLOOR CO		XCEPT BATH	(ROOMS)	
6. KITCHEN CUIBO		4		
7. TRIM AROUND				
8. REPLACE ANY EL		UTLETS THAK	ARE BAD,	
9. KEPLACE PHONE	JACKS			+ -
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