

LOT 42

7019

Columbia County New Building Permit Application

INC DOCUMENT

For Office Use Only Application # 1708-103 Date Received 8/29 By JW Permit # 35915/2498
 Zoning Official CHS Date 10-9-17 Flood Zone X Land Use RLD Zoning RSP-2
 FEMA Map # _____ Elevation _____ MFE 1' above River _____ Plans Examiner TC Date 10-6-17
 Comments _____
☒ NOC ☒ EH ☒ Deed or PA ☒ Site Plan ☐ State Road Info ☒ Well letter ☒ 911 Sheet ☐ Parent Parcel # _____
☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter
☐ Owner Builder Disclosure Statement ☐ Land Owner Affidavit ☐ Ellisville Water ☒ App Fee Paid ☒ Sub VF Form

Septic Permit No. 17-0655 OR City Water ☐ Fax _____

Applicant (Who will sign/pickup the permit) James M. Lipscomb Phone 386-623-9141

Address 331 S.E. Woods Terr. Lake City, FL 32025

Owners Name James Rhett Smith DELTA OMEGA Properties, Inc. Phone 357-5288

911 Address 630 SW Chesterfield Circle Lake City FL 32024

Contractors Name Lipscomb & Eagle Development, Inc. Phone 386-623-9141

Address 184 SW Dominos Way Suite 104, Lake City, FL 32025

Contractor Email JMLHBA@gmail.com

***Include to get updates on this job.

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address WM. Design & Associates, Inc. - 426 S.W. Commerce Dr. Ste. 130

Mortgage Lenders Name & Address N.A. NICK GRISLO, JR., 1758 NW BROWN RD, L.C., FL 32055

Circle the correct power company ☐ FL Power & Light ☒ Clay Elec. ☐ Suwannee Valley Elec. ☐ Duke Energy

Property ID Number 24-45-16-03117-142 Estimated Construction Cost \$100,000.00

Subdivision Name Crosswinds Lot 42 Block _____ Unit _____ Phase 1

Driving Directions from a Major Road 47 South to C.R. 242, turn right to S.W. Cannon Creek Drive, right to S.W. Chesterfield Circle, left to Lot 42

Construction of Single family residence Commercial OR ☒ Residential

Proposed Use/Occupancy Single family Number of Existing Dwellings on Property _____

Is the Building Fire Sprinkled? NO If Yes, blueprints included _____ Or Explain _____

Circle Proposed ☒ Culvert Permit or ☐ Culvert Waiver or ☐ D.O.T. Permit or ☐ Have an Existing Drive

Actual Distance of Structure from Property Lines - Front 50' Side 25' 23' 11" Side 25' 23' 11" Rear 100' 105' 6"

Number of Stories 1 Heated Floor Area 1523 Total Floor Area 2160 Acreage .50

Zoning Applications applied for (Site & Development Plan, Special Exception, etc.)

JW sent email 8.30.17 spoke w/ James 10.25.17

Halls A/C

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # 1708-103 JOB NAME Lot 42 Crosswinds

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

Columbia County issues combination permits. One permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the general contractors permit.

NOTE: It shall be the responsibility of the general contractor to make sure that all of the subcontractors are licensed with the Columbia County Building Department.

Use website to confirm licenses: <http://www.columbiacountyfla.com/PermitSearch/ContractorSearch.asp>:

NOTE: If this should change prior to completion of the project, it is your responsibility to have a corrected form submitted to our office, before that work has begun.

Violations will result in stop work orders and/or fines.

ELECTRICAL	<input checked="" type="checkbox"/>	Print Name: <u>Melvin Huns</u>	Signature: <u>A/C Huns</u>	Head	<input type="checkbox"/>	Uc
		Company Name: <u>Huns Electrical & Communications, Inc.</u>		Ucb	<input type="checkbox"/>	Ucb
CC# <u>1447</u>		License #: <u>EC1303893</u>	Phone #: <u>352-472-8777</u>	W/C	<input type="checkbox"/>	W/C
				Ex	<input type="checkbox"/>	Ex
				DE	<input type="checkbox"/>	DE
MECHANICAL/A/C	<input checked="" type="checkbox"/>	Print Name: <u>DAVID HALL</u>	Signature: <u>David Hall</u>	Head	<input type="checkbox"/>	Uc
		Company Name: <u>David Hall's, Inc.</u>		Ucb	<input type="checkbox"/>	Ucb
CC# <u>568</u>		License #: <u>CAC057424</u>	Phone #: <u>(386) 755-9792</u>	W/C	<input type="checkbox"/>	W/C
				Ex	<input type="checkbox"/>	Ex
				DE	<input type="checkbox"/>	DE
PLUMBING/GAS	<input checked="" type="checkbox"/>	Print Name: <u>Paul Kevin Coleman</u>	Signature: <u>Paul K. Coleman</u>	Head	<input type="checkbox"/>	Uc
		Company Name: <u>Coleman's Plumbing Inc</u>		Ucb	<input type="checkbox"/>	Ucb
CC# <u>767</u>		License #: <u>CEC1425624</u>	Phone #: <u>352-472-4114</u>	W/C	<input type="checkbox"/>	W/C
				Ex	<input type="checkbox"/>	Ex
				DE	<input type="checkbox"/>	DE
ROOFING	<input checked="" type="checkbox"/>	Print Name: <u>Richard S. Rooting</u>	Signature: <u>Richard S. Rooting</u>	Head	<input type="checkbox"/>	Uc
		Company Name: <u>Richard S. Rooting LLC</u>		Ucb	<input type="checkbox"/>	Ucb
CC# <u>1437</u>		License #: <u>RE#29027527</u>	Phone #: <u>386 867 0221</u>	W/C	<input type="checkbox"/>	W/C
				Ex	<input type="checkbox"/>	Ex
				DE	<input type="checkbox"/>	DE
SHEET METAL	<input type="checkbox"/>	Print Name: _____	Signature: _____	Head	<input type="checkbox"/>	Uc
		Company Name: _____		Ucb	<input type="checkbox"/>	Ucb
CC# _____		License #: _____	Phone #: _____	W/C	<input type="checkbox"/>	W/C
				Ex	<input type="checkbox"/>	Ex
				DE	<input type="checkbox"/>	DE
FIRE SYSTEM/SPRINKLER	<input type="checkbox"/>	Print Name: _____	Signature: _____	Head	<input type="checkbox"/>	Uc
		Company Name: _____		Ucb	<input type="checkbox"/>	Ucb
CC# _____		License #: _____	Phone #: _____	W/C	<input type="checkbox"/>	W/C
				Ex	<input type="checkbox"/>	Ex
				DE	<input type="checkbox"/>	DE
SOLAR	<input type="checkbox"/>	Print Name: _____	Signature: _____	Head	<input type="checkbox"/>	Uc
		Company Name: _____		Ucb	<input type="checkbox"/>	Ucb
CC# _____		License #: _____	Phone #: _____	W/C	<input type="checkbox"/>	W/C
				Ex	<input type="checkbox"/>	Ex
				DE	<input type="checkbox"/>	DE
STATE SPECIALTY	<input type="checkbox"/>	Print Name: _____	Signature: _____	Head	<input type="checkbox"/>	Uc
		Company Name: _____		Ucb	<input type="checkbox"/>	Ucb
CC# _____		License #: _____	Phone #: _____	W/C	<input type="checkbox"/>	W/C
				Ex	<input type="checkbox"/>	Ex
				DE	<input type="checkbox"/>	DE

Ref: FS, 440.103, OAD, 2016-30

Columbia County Building Permit Application

CODE: Florida Building Code 2014 and the 2011 National Electrical Code.

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.

TIME LIMITATIONS OF APPLICATION : An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless pursued in good faith or a permit has been issued.

TIME LIMITATIONS OF PERMITS: 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 work is commenced. A valid permit receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous approved inspection.

FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment: According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects to make other legally required payments, the people who are owed money may look to your property for payment, even if you have paid your contractor in full. This means if a lien is filed against your property, it could be sold against your will to pay for labor, materials or other services which your contractor may have failed to pay.

NOTICE OF RESPONSIBILITY TO CONTRACTOR AND AGENT: YOU ARE HEREBY NOTIFIED as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes to lot grades that result in ponding of water, or other damage to roadway and other public infrastructure facilities caused by you or your contractor, subcontractors, agents or representatives in the construction and/or improvement of the building and lot for which this permit is issued. No certificate of occupancy will be issued until all corrective work to these public infrastructures and facilities has been corrected.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNERS CERTIFICATION: I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

NOTICE TO OWNER: There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

DEBRA VINCELA PROPERTIES INC
RILEY SMITH

Print Owners Name

Robert Smith
Owners Signature

****Property owners must sign here before any permit will be issued.**

****If this is an Owner Builder Permit Application then, ONLY the owner can sign the building permit when it is issued.**

CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.

James M. Lipscomb
Contractor's Signature

Contractor's License Number CBC1253543
Columbia County
Competency Card Number 496

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 29 day of AUGUST 2017.

Personally known ☒ or Produced Identification ☐

[Signature]
State of Florida Notary Signature (For the Contractor)

SEAL:



MICHELLE L. LASHLEY
MY COMMISSION # GG 016830
EXPIRES: July 31, 2020
Bonded Thru Budget Notary Services

Columbia County 9-1-1 Addressing / GIS Department
Address Assignment Data
Crosswinds, Phase 1 and 2, Subdivisions, Section 24, Township 4 South, Range 16
East, Columbia County, Florida

LOT#: ADDRESS ASSIGNED

1 701 SW CHESTERFIELD CIR
2 711 SW CHESTERFIELD CIR
3 735 SW CHESTERFIELD CIR
4 765 SW CHESTERFIELD CIR
5 118 SW ERSKINE CT
6 140 SW ERSKINE CT
7 156 SW ERSKINE CT
8 157 SW ERSKINE CT
9 141 SW ERSKINE CT
10* 119 SW ERSKINE CT
10* 795 SW CHESTERFIELD CIR
11 811 SW CHESTERFIELD CIR
12 833 SW CHESTERFIELD CIR
13 853 SW CHESTERFIELD CIR
14* 875 SW CHESTERFIELD CIR
14* 194 SW CHESTERFIELD CIR
15* 201 SW CHESTERFIELD CIR
15* 243 SW CHESTERFIELD CIR
16 269 SW CHESTERFIELD CIR
17 289 SW CHESTERFIELD CIR
18 309 SW CHESTERFIELD CIR
19 329 SW CHESTERFIELD CIR
20 347 SW CHESTERFIELD CIR
21 357 SW CHESTERFIELD CIR
22 369 SW CHESTERFIELD CIR
23 397 SW CHESTERFIELD CIR
24 431 SW CHESTERFIELD CIR
25 474 SW CHESTERFIELD CIR
26* 454 SW CHESTERFIELD CIR
26* 418 SW CHESTERFIELD CIR
27* 382 SW CHESTERFIELD CIR
27* 348 SW CHESTERFIELD CIR
28 326 SW CHESTERFIELD CIR
29 302 SW CHESTERFIELD CIR
30 276 SW CHESTERFIELD CIR

LOT#: ADDRESS ASSIGNED

31 256 SW CHESTERFIELD CIR
32 236 SW CHESTERFIELD CIR
33 886 SW CHESTERFIELD CIR
34 868 SW CHESTERFIELD CIR
35 850 SW CHESTERFIELD CIR
36 830 SW CHESTERFIELD CIR
37 810 SW CHESTERFIELD CIR
38 768 SW CHESTERFIELD CIR
39* 720 SW CHESTERFIELD CIR
39* 686 SW CHESTERFIELD CIR
40 668 SW CHESTERFIELD CIR
41 648 SW CHESTERFIELD CIR
42 630 SW CHESTERFIELD CIR
43 610 SW CHESTERFIELD CIR
44 590 SW CHESTERFIELD CIR
45 572 SW CHESTERFIELD CIR
46 552 SW CHESTERFIELD CIR
47 449 SW CHESTERFIELD CIR
48 465 SW CHESTERFIELD CIR
49 485 SW CHESTERFIELD CIR
50 505 SW CHESTERFIELD CIR
51 525 SW CHESTERFIELD CIR
52 543 SW CHESTERFIELD CIR
53 563 SW CHESTERFIELD CIR
54 583 SW CHESTERFIELD CIR
55 603 SW CHESTERFIELD CIR
56 623 SW CHESTERFIELD CIR
57 641 SW CHESTERFIELD CIR
58 661 SW CHESTERFIELD CIR
59 683 SW CHESTERFIELD CIR

**(NOTE: * IDENTIFIES CORNER LOTS.
CONTACT THE 9-1-1 ADDRESSING
DEPARTMENT FOR CORRECT
ADDRESS.)**

@ CAM110M01 S CamaUSA Appraisal System Columbia County
8/30/2017 11:39 **Property Maintenance** 12000 Land 001
Year T Property **** Deleted **** Sel AG 000
2017 R 24-4S-16-03117-142 Bldg 000
Owner DELTA OMEGA PROPERTIES INC Conf Xfea 000
Addr 3454 SW CR 242 12000 TOTAL B

-Cap?- .500 Total Acres
SOH 10% ApYr ERnwl ARnwl Notc

City,St LAKE CITY FL Zip 32024 N Y
Country (PUD1) (PUD2) (PUD3) MKTA06
SplT/Co JVChgCd pud4 pud5 pud6
Appr By RP Date 11/04/2009 AppCode UseCd 000000 VACANT
TxDist Nbhd MktA ExCode Exemption/% TxCode Units Tp
002 24416.00 06

DIST 3

House# 630 Street CHESTERFIELD MD CIR Dir SW #
City Zip

Subd N/A Condo .00 N/A

Sect 24 Twn 4S Rnge 16 Subd Blk Lot

Legals LOT 42 CROSSWINDS S/D PHASE 1. QC 1152-452

Map# Mnt 5/30/2012 LARRY

F1=Task F2=ExTx F3=Exit F4=Prompt F11=Docs F10=GoTo PgUp/PgDn F24=More

HOME

News Releases

NEW Record Search (beta)

NEW GIS Map

Sales Report

Record Search

GIS Map

Sales Report

TAX Estimator

General Info

Exemptions

Amendment 1

Amendment 10

AG Classification

Tax Rates

T P P

H3 909

VAB Value Adjustment Board

F A Q

Budget

Homestead Fraud

Download Data

Download Forms

Important Dates

Links

Contact Us

Columbia County Property Appraiser - Interactive Record Search & GIS Mapping System -

New Search

Search Results

Parcel Details

GIS Map

Columbia County Property Appraiser

updated: 8/17/2017

Parcel: 24-4S-16-03117-102

<< Next Lower Parcel Next Higher Parcel >>

Owner & Property Info

Owner's Name	DELTA OMEGA PROPERTIES INC		
Mailing Address	3454 SW CR 242 LAKE CITY, FL 32024		
Site Address	711 SW CHESTERFIELD CIR		
Use Desc. (code)	TIMBERLAND (005500)		
Tax District	2 (County)	Neighborhood	24416
Land Area	24.340 ACRES	Market Area	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOTS 2 THRU 5 AND 7 THRU 9 AND 13 THRU 14 AND 19 THRU 30 AND 32 THRU 38 AND 40 THRU 44 AND 46 THRU 54 AND 56 THRU 58 PHASES 1 & 2 CROSSWINDS S/D.			

Property & Assessment Values

2016 Certified Values

Mkt Land Value	cnt: (1)	\$0.00
Ag Land Value	cnt: (0)	\$8,640.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$8,640.00
Just Value		\$1,011,372.00
Class Value		\$8,640.00
Assessed Value		\$8,640.00
Exempt Value		\$0.00
Total Taxable Value		Cnty: \$8,640 Other: \$8,640 Schl: \$8,640

2017 Working Values

(...Hide Values)

Mkt Land Value	cnt: (1)	\$0.00
Ag Land Value	cnt: (0)	\$8,957.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$8,957.00
Just Value		\$1,011,372.00
Class Value		\$8,957.00
Assessed Value		\$8,957.00
Exempt Value		\$0.00
Total Taxable Value		Cnty: \$8,957 Other: \$8,957 Schl: \$8,957

NOTE: 2017 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
NONE						

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
005500	TIMBER 2 (AG)	24.34 AC	1.00/1.00/1.00/1.00	\$368.00	\$8,957.00
009910	MKT.VAL.AG (MKT)	24.34 AC	1.00/1.00/1.00/1.00	\$0.00	\$1,011,372.00

Columbia County Property Appraiser

updated: 8/17/2017

1 of 43

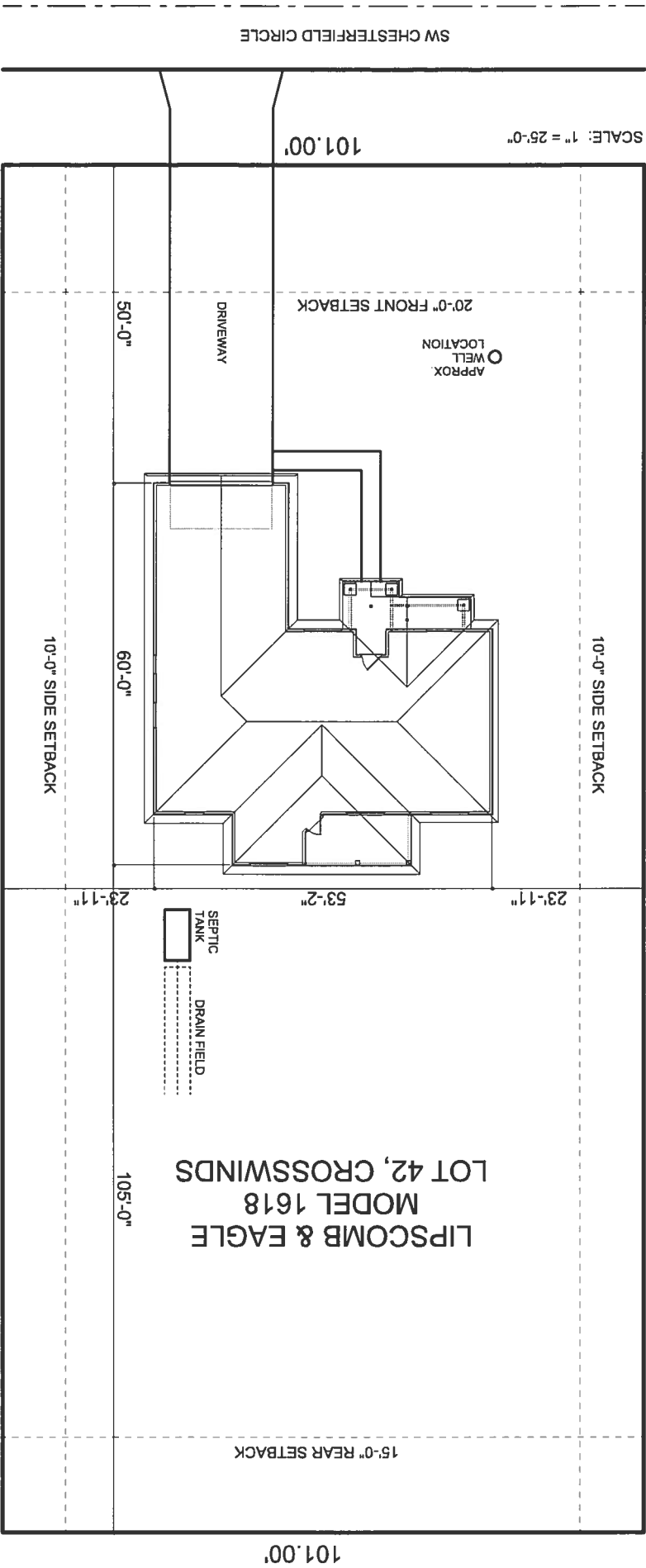
Next >>

DISCLAIMER

This information was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's

http://columbia.floridapa.com/GIS/Search_F.asp

8/28/2017



SW CHESTERFIELD CIRCLE

SCALE: 1" = 25'-0"

101.00'

20'-0" FRONT SETBACK

APPROX
WELL
LOCATION

DRIVEWAY

50'-0"

60'-0"

10'-0" SIDE SETBACK

215.00'

215.00'

10'-0" SIDE SETBACK

23'-11"

53'-2"

23'-11"

SEPTIC
TANK

DRAIN FIELD

LIPSCOMB & EAGLE
MODEL 1618
LOT 42, CROSSWINDS

105'-0"

15'-0" REAR SETBACK

101.00'

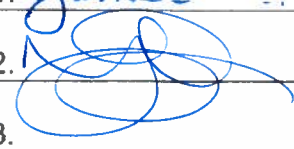


COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

LETTER OF AUTHORIZATION TO SIGN FOR PERMITS

I, James M. Lipscomb (license holder name), licensed qualifier
for Lipscomb & Eagle Development, Inc. (company name), do certify that

the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. _____	1. _____
2. Michelle Lashley	2. 
3. _____	3. _____
4. _____	4. _____
5. _____	5. _____

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

James M. Lipscomb **CBC1253543** 08-28-2017
License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:
STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is James M. Lipscomb
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 28 day of August, 20 17.


NOTARY'S SIGNATURE

(Seal/Stamp)



MICHELLE L. LASHLEY
MY COMMISSION # GG 016830
EXPIRES: July 31, 2020
Bonded Thru Budget Notary Services

[Florida Department of State](#)

DIVISION OF CORPORATIONS

[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Detail By Document Number](#) /**Detail by Entity Name**

Florida Profit Corporation
DELTA OMEGA PROPERTIES, INC.

Filing Information

Document Number P04000026348
FEI/EIN Number 20-0832353
Date Filed 02/10/2004
State FL
Status ACTIVE
Last Event REINSTATEMENT
Event Date Filed 09/28/2010

Principal Address

3484 SW CR 242
LAKE CITY, FL 32024

Changed: 03/25/2013

Mailing Address

3484 SW CR 242
LAKE CITY, FL 32024

Changed: 03/25/2013

Registered Agent Name & Address

SMITHEY, JAMES R
3484 SW CR 242
LAKE CITY, FL 32024

Address Changed: 03/25/2013

Officer/Director Detail**Name & Address**

Title D

SMITHEY, JAMES R
3484 SW CR 242
LAKE CITY, FL 32024

Title D

SMITHEY, BRYAN B

1490 NW BROWN RD
LAKE CITY, FL 32055

Annual Reports

Report Year	Filed Date
2015	02/17/2015
2016	02/04/2016
2017	03/15/2017

Document Images

03/15/2017 -- ANNUAL REPORT	View image in PDF format
02/04/2016 -- ANNUAL REPORT	View image in PDF format
02/17/2015 -- ANNUAL REPORT	View image in PDF format
01/11/2014 -- ANNUAL REPORT	View image in PDF format
03/25/2013 -- ANNUAL REPORT	View image in PDF format
02/20/2012 -- ANNUAL REPORT	View image in PDF format
01/07/2011 -- ANNUAL REPORT	View image in PDF format
09/28/2010 -- REINSTATEMENT	View image in PDF format
03/26/2009 -- ANNUAL REPORT	View image in PDF format
09/23/2008 -- ANNUAL REPORT	View image in PDF format
04/23/2008 -- ANNUAL REPORT	View image in PDF format
04/13/2007 -- ANNUAL REPORT	View image in PDF format
01/03/2006 -- ANNUAL REPORT	View image in PDF format
02/14/2005 -- ANNUAL REPORT	View image in PDF format
02/10/2004 -- Domestic Profit	View image in PDF format



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 17-0655
DATE PAID: 7/13/17
FEE PAID: 816.80
RECEIPT #: 1310912

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Delta Omega Properties Inc

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 42 BLOCK: na SUB: Crosswinds S/D PH 1 PLATTED: 4/20/06

PROPERTY ID #: 24-4S-16-03117-102 ZONING: _____ I/M OR EQUIVALENT: [Y] ☒ N

PROPERTY SIZE: .5 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [] ☐ <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y] ☒ N DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: SW Chesterfield Cir, LC

DIRECTIONS TO PROPERTY: TR US-90 West, TL SW Sisters Welcome Rd, TL SW Kicklighter Road, TL Cannon Creek Dr, TR Chestrtfield Cir, TR at "T", 1/4 mile on left

(See plat map attached)

BUILDING INFORMATION

☒ RESIDENTIAL [] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
---------	-----------------------	-----------------	--------------------	--

1	SF Residential	4	1618	
---	----------------	---	------	--

2				
---	--	--	--	--

3				
---	--	--	--	--

☒ Floor/Equipment Drains ☐ Other (Specify) _____

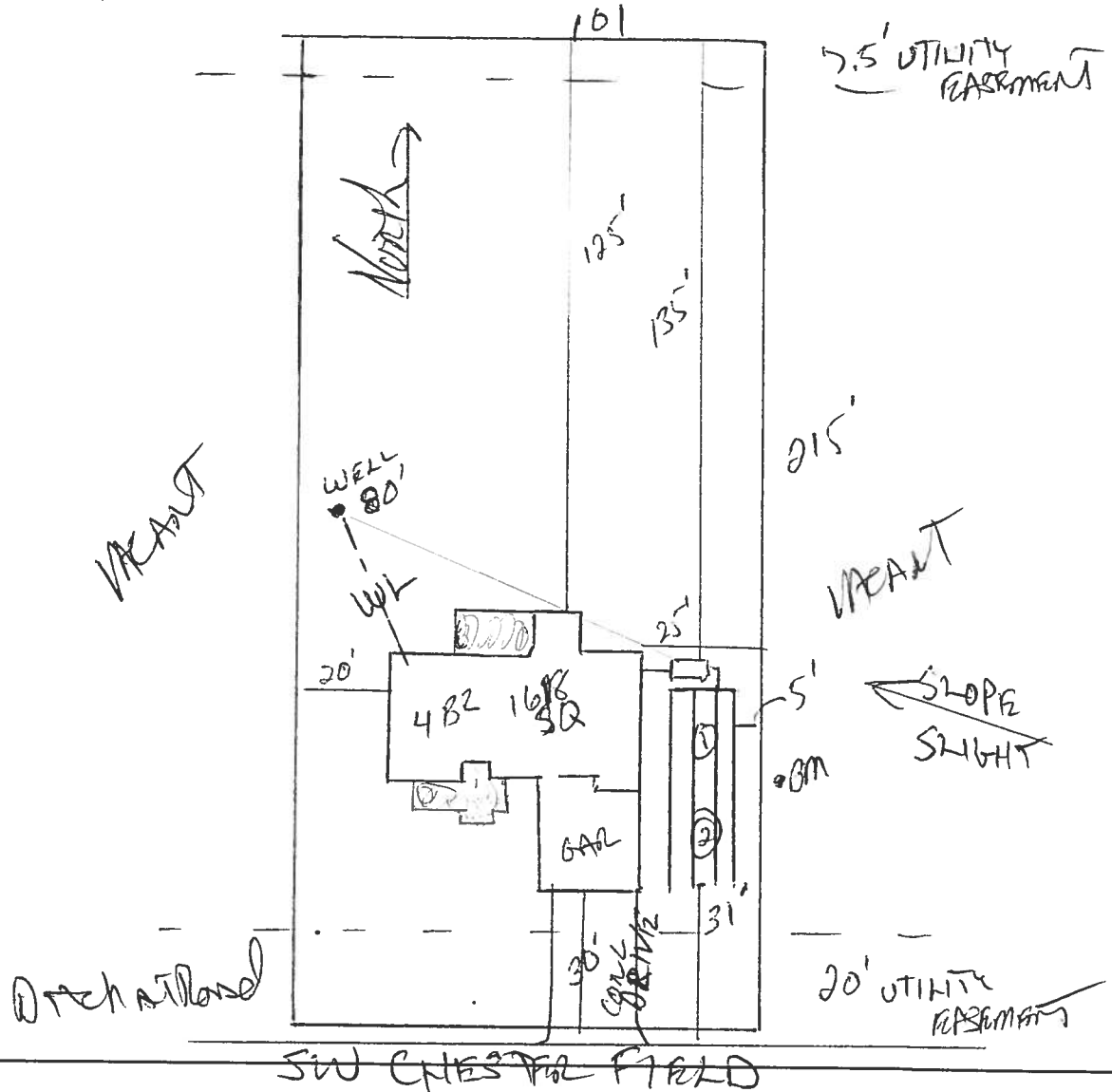
SIGNATURE: Rocky D DATE: 10/11/2017

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 17-0655

Datta-Dugga ----- PART II - SITEPLAN -----

Scale: 1 inch = 40 feet.



Site Plan submitted by: Rach D 7-0

Plan Approved ✓ Not Approved _____

By [Signature] Culver

MASTER CONTRACTOR

Date 10/28/17

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

24-45-14-03117-142

Clerk's Office Stamp

Inst: 201712019605 Date: 10/26/2017 Time: 8:19AM
Page 1 of 1 B: 1346 P: 1915, P. DeWitt Casson, Clerk of Court
Columbia, County, By: BD
Deputy Clerk

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

1. Description of property (legal description): Phase 1 Crosswinds S.D.
a) Street (job) Address: 630 S.W. Chesterfield Cir Lot 42
2. General description of improvements: New Home
3. Owner Information or Lessee information if the Lessee contracted for the improvements:
a) Name and address: Delta Omega Properties Inc. (Rhett Smithy)
b) Name and address of fee simple titleholder (if other than owner):
c) Interest in property:
4. Contractor Information
a) Name and address: Lipscomb & Eagle Development Inc 104 S.W. Dominoes Way
b) Telephone No.: 386-623-9141 Ste. 104
5. Surety Information (if applicable, a copy of the payment bond is attached):
a) Name and address: N.A.
b) Amount of Bond:
c) Telephone No.:
6. Lender
a) Name and address: N.A.
b) Phone No.:
7. Person 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:
a) Name and address: James Lipscomb 104 S.W. Dominoes Way Ste 104 32025
b) Telephone No.: 386-623-9141
8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:
a) Name: James Lipscomb OF Lipscomb & Eagle Development Inc.
b) Telephone No.: 386-623-9141
9. Expiration date of Notice of Commencement (the expiration date will be 1 year from the date of recording unless a different date is specified):

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

STATE OF FLORIDA
COUNTY OF COLUMBIA

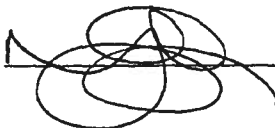
10. James Rhett Smithy
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
JAMES RHETT SMITHEY PRES
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 1 day of SEPTEMBER, 2017, by:

JAMES RHETT SMITHEY as OWNER for DELTA OMEGA PROPERTIES, INC.
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

Personally Known ☒ OR Produced Identification ☐ Type

Notary Signature



Notary Stamp or Seal:



MICHELLE L. LASHLEY
MY COMMISSION # GG 016830
EXPIRES: July 31, 2020
Bonded Thru Budget Notary Services