

DATE 01/08/2013

Columbia County Building Permit
This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000030703

APPLICANT BEVERLY REED PHONE 386.752.4072
ADDRESS 2230 SE BAYA DRIVE, STE. 101 LAKE CITY FL 32058
OWNER ANTHONY GOLINO PHONE 850 528-3043
ADDRESS 545 SW BUCHANAN DRIVE LAKE CITY FL 32024
CONTRACTOR L. DON REED PHONE 386.752.4072
LOCATION OF PROPERTY 247S, TL ON 242, TL ON FRIENDSHIP, TR ON BUCHANAN DR,
2ND TO LAST LOT ON L.

TYPE DEVELOPMENT REROOF/SFD ESTIMATED COST OF CONSTRUCTION 7500.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH 5'12 FLOOR
LAND USE & ZONING MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT REAR SIDE
NO. EX.D.U. 1 FLOOD ZONE DEVELOPMENT PERMIT NO.

PARCEL ID 22-4S-16-03090-135 SUBDIVISION BLAINE ESTATES
LOT 5 BLOCK 2 PHASE UNIT 2 TOTAL ACRES 1.00

RC0055399
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING JLW N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: NOC ON FILE.
Check # or Cash 2429

FOR BUILDING & ZONING DEPARTMENT ONLY (footer/Slab)

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

BUILDING PERMIT FEE \$ 40.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 0.00 ZONING CERT. FEE \$ FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ CULVERT FEE \$ TOTAL FEE 40.00
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.
NOTICE: ALL OTHER APPLICABLE STATE OR FEDERAL PERMITS SHALL BE OBTAINED BEFORE COMMENCEMENT OF THIS PERMITTED DEVELOPMENT.
"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.
The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

Golino #30703



Golino #30703

Columbia County Building Permit Application

For Office Use Only		Application # <u>130114</u>	Date Received <u>1/8</u>	By <u>Tw</u>	Permit # <u>30703</u>
Zoning Official _____	Date _____	Flood Zone _____	Land Use _____	Zoning _____	
FEMA Map # _____	Elevation _____	MFE _____	River _____	Plans Examiner _____	Date _____
Comments _____					
<input checked="" type="checkbox"/> NOC <input type="checkbox"/> EH <input checked="" type="checkbox"/> Deed or PA <input type="checkbox"/> Site Plan <input type="checkbox"/> State Road Info <input type="checkbox"/> Well letter <input type="checkbox"/> 911 Sheet <input type="checkbox"/> Parent Parcel # _____					
<input type="checkbox"/> Dev Permit # _____ <input type="checkbox"/> In Floodway <input type="checkbox"/> Letter of Auth. from Contractor <input type="checkbox"/> F W Comp. letter					
IMPACT FEES: EMS _____ Fire _____ Corr _____ <input type="checkbox"/> Sub VF Form					
Road/Code _____		School _____	= TOTAL (Suspended) <input type="checkbox"/> App Fee Paid		

Septic Permit No. _____ Fax 755-7272

Name Authorized Person Signing Permit Beverly Reed Phone 752-4072

Address 2230 SE Baya Dr. Ste. 101 Lake City, FL 32025

Owners Name Anthony + Karen Golino Phone 984-0032

911 Address 545 SW Buchanan Dr. Lake City FL 32024

Contractors Name Don Reed Construction, Inc Phone 752-4072

Address 2230 SE Baya Dr. Ste. 101 Lake City, FL 32025

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address _____

Mortgage Lenders Name & Address _____

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress Energy

Property ID Number 2245-1603090135 Estimated Cost of Construction \$7,500

Subdivision Name Blaine Estates Lot 5 Block 2 Unit _____ Phase 2

Driving Directions Branford Hwy ; TL on SW Bay Meadows Street ;
TL on SW Friendship Way ; TR SW Buchanan Drive ;
House on left (2nd to last lot on L) Number of Existing Dwellings on Property 1

Construction of Re roof - SFD Total Acreage 1 ac. Lot Size _____

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 5/12

Actual Distance of Structure from Property Lines - Front _____ Side _____ Side _____ Rear _____

Number of Stories 1 Heated Floor Area 1500 Total Floor Area 2604 Roof Pitch 5/12

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. **CODE:** Florida Building Code 2007 with 2009 Supplements and the 2008 National Electrical Code.

2425

Columbia County Building Permit Application

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 such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

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 BUILDING PERMITEE: **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.


Owners Signature

(Owners Must Sign All Applications Before Permit Issuance.)

****OWNER BUILDERS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.**

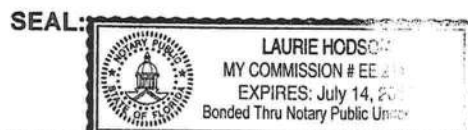
CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.


Contractor's Signature (Permitee)

Contractor's License Number RC0055399
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 4 day of January 2013.
Personally known ☒ or Produced Identification _____

State of Florida Notary Signature (For the Contractor)



PRODUCT APPROVAL SPECIFICATION SHEET

Location: 545 SW Buchanan Dr

Project Name: Goleno, Karen

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and the product approval number(s) on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit on or after April 1, 2004. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. More information about statewide product approval can be obtained at www.floridabuilding.org

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
A. EXTERIOR DOORS			
1. Swinging			
2. Sliding			
3. Sectional			
4. Roll up			
5. Automatic			
6. Other			
B. WINDOWS			
1. Single hung			
2. Horizontal Slider			
3. Casement			
4. Double Hung			
5. Fixed			
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11. Dual Action			
12. Other			
C. PANEL WALL			
1. Siding			
2. Soffits			
3. EIFS			
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block			
8. Membrane			
9. Greenhouse			
10. Other			
D. ROOFING PRODUCTS			
1. Asphalt Shingles			
2. Underlayments			
3. Roofing Fasteners			
4. Non-structural Metal Rf	Agri-Metal	Metal Roof	FL6809
5. Built-Up Roofing			
6. Modified Bitumen			
7. Single Ply Roofing Sys			
8. Roofing Tiles			
9. Roofing Insulation			
10. Waterproofing			
11. Wood shingles /shakes			
12. Roofing Slate			

Category/Subcategory (cont.)	Manufacturer	Product Description	Approval Number(s)
13. Liquid Applied Roof Sys			
14. Cements-Adhesives – Coatings			
15. Roof Tile Adhesive			
16. Spray Applied Polyurethane Roof			
17. Other			
E. SHUTTERS			
1. Accordion			
2. Bahama			
3. Storm Panels			
4. Colonial			
5. Roll-up			
6. Equipment			
7. Others			
F. SKYLIGHTS			
1. Skylight			
2. Other			
G. STRUCTURAL COMPONENTS			
1. Wood connector/anchor			
2. Truss plates			
3. Engineered lumber			
4. Railing			
5. Coolers-freezers			
6. Concrete Admixtures			
7. Material			
8. Insulation Forms			
9. Plastics			
10. Deck-Roof			
11. Wall			
12. Sheds			
13. Other			
H. NEW EXTERIOR ENVELOPE PRODUCTS			
1.			
2.			

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) the performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.

I understand these products may have to be removed if approval cannot be demonstrated during inspection.

Contractor or Contractor's Authorized Agent Signature

545 SW Buchanan Drive

Location Lake City, FL 32024

Don Reed

Print Name

Date

Columbia County Property Appraiser

CAMA updated: 12/19/2012

2012 Tax Year

Parcel: 22-4S-16-03090-135

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

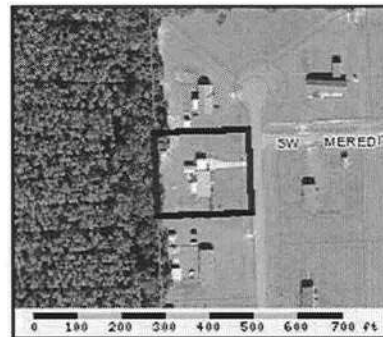
Interactive GIS Map

Print

Search Result: 1 of 1

Owner & Property Info

Owner's Name	GOLINO ANTHONY & KAREN		
Mailing Address	545 SW BUCHANAN DR LAKE CITY, FL 32024		
Site Address	545 SW BUCHANAN DR		
Use Desc. (code)	MOBILE HOM (000200)		
Tax District	3 (County)	Neighborhood	22416
Land Area	1.000 ACRES	Market Area	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. LOT 5 BLOCK 2 BLAINE ESTATES PHASE 2. WD 1007-158.		



Property & Assessment Values

2012 Certified Values		
Mkt Land Value	ent: (0)	\$17,681.00
Ag Land Value	ent: (2)	\$0.00
Building Value	ent: (1)	\$53,820.00
XFOB Value	ent: (4)	\$6,000.00
Total Appraised Value		\$77,501.00
Just Value		\$77,501.00
Class Value		\$0.00
Assessed Value		\$77,501.00
Exempt Value	(code: HX H3)	\$50,000.00
Total Taxable Value	Cnty: \$27,501 Other: \$27,501 Schl:	\$52,501

2013 Working Values

NOTE:
2013 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
2/6/2004	1007/158	WD	V	Q		\$18,500.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SFR MANUF (000200)	2006	(31)	1800	2664	\$52,005.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0166	CONC.PAVMT	2005	\$1,440.00	0000720.000	12 x 60 x 0	(000.00)
0294	SHED WOOD/	2005	\$1,920.00	0000384.000	16 x 24 x 0	(000.00)
0190	FPLC PF	2007	\$1,200.00	0000001.000	0 x 0 x 0	(000.00)
0296	SHED METAL	2007	\$1,440.00	0000120.000	12 x 10 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000200	MBL HM (MKT)	1 LT	1.00/1.00/1.00/1.00	\$15,681.60	\$15,681.00
009945	WELL/ SEPT (MKT)	1 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00

Columbia County Property Appraiser

CAMA updated: 12/19/2012

1 of 1

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, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.












Trip to:
545 SW Buchanan Dr
Lake City, FL 32024-1249
11.69 miles / 18 minutes

Notes



2230 SE Baya Dr, Lake City, FL 32025-8006

-  1. Start out going **west** on **SE Baya Dr / SR-10A** toward **SE Llewellyn Ave**. Continue to follow **SR-10A W**. [Map](#) 3.1 Mi
-   2. Turn **slight left** onto **US-90 W**. [Map](#) 1.1 Mi
-   3. Turn **left** onto **SR-247 / SW Branford Rd / SW State Road 247**. [Map](#) 5.6 Mi
-  4. Turn **sharp left** onto **SW Bay Meadows St**. [Map](#) 1.3 Mi
-  5. Turn **left** onto **SW Friendship Way**. [Map](#) 0.2 Mi
-  6. Turn **right** onto **SW Buchanan Dr**. [Map](#) 0.4 Mi
-  7. **545 SW BUCHANAN DR** is on the **left**. [Map](#)



545 SW Buchanan Dr, Lake City, FL 32024-1249

Total Travel Estimate: 11.69 miles - about 18 minutes

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NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

22-45-16-0309-135

Clerk's Office Stamp

B 201312000301 Date: 1/8/2013 Time: 11:04 AM
DC, P. DeWitt Cason, Columbia County Page 1 of 1 B. 1247 P. 1335

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): lot 5 Block 2 Blaine Estates Phase 2
a) Street (Job) Address: _____

2. General description of improvements: Reroof

3. Owner Information

a) Name and address: Anthony & Karen Golino 646 SW Buchanan Dr Lake City FL 32024
b) Name and address of fee simple titleholder (if other than owner) _____
c) Interest in property _____

4. Contractor Information

a) Name and address: Don Reed Construction 2230 SE Bay Dr #101 Lake City FL 32025
b) Telephone No.: 386-752-4072 Fax No. (Opt.) _____

5. Surety Information

a) Name and address: _____
b) Amount of Bond: _____
c) Telephone No.: _____ Fax No. (Opt.) _____

6. Lender

a) Name and address: _____
b) Phone No.: _____

7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served:

a) Name and address: _____
b) Telephone No.: _____ Fax No. (Opt.) _____

8. In addition to himself, 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 and address: _____
b) Telephone No.: _____ Fax No. (Opt.) _____

9. Expiration date of Notice of Commencement (the expiration date is one 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. Karen Golino
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
Karen Golino
Printed Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 4 day of January, 2013, by:
Karen Golino as owner (type of authority, e.g. officer, trustee, attorney
fact) for _____ (name of party on behalf of whom instrument was executed).

Personally Known ☒ OR Produced Identification _____ Type _____

Notary Signature _____ Notary Stamp or Seal: _____

—AND—

11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Karen Golino
Signature of Natural Person Signing (in line #10 above.)



Columbia County

BUILDING DEPARTMENT

Golino

Inspection Affidavit

RE: Permit Number: 30703

I Don Reed, licensed as a(n) Contractor* /Engineer/Architect,
(please print name and circle Lic. Type) FS 468 Building Inspector*

License #: R0055399

On or about 1.18.13, I did personally inspect the
(Date & time)

☐ roof deck attachment ☐ secondary water barrier ☐ roof to wall connection

work at 545 SW Buchanan DR. & C
(Job Site Address)

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.)

Don Reed
Signature

STATE OF FLORIDA
COUNTY OF

Sworn to and subscribed before me this 20 day of February, 2013

By Laurie Hodson, Notary Public, State of Florida

Personally known ☒ or

Produced Identification ☐ Type of identification produced. _____

(Print, type or stamp name)



* Include photographs of each plane of the roof with the permit number clearly shown marked on the deck for each inspection. Place a tape measure next to the nailing pattern to show distance between nails.

* Photographs must clearly show all work and have the permit number indicated on the roof.

* Affidavit and Photographs must be provided when final inspection is requested.