

DATE 03/11/2013

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

PERMIT
000030837

APPLICANT FAUSTIN GALLEGOS PHONE 352-615-1519
ADDRESS 14280 NW 87TH AVE RD OCALA FL 32686
OWNER DENISE & WALT GRAHAM PHONE 352-867-0007
ADDRESS 180 SW SLASH LN LAKE CITY FL 32024
CONTRACTOR DL WILLIAMS PHONE 754-1987
LOCATION OF PROPERTY 90 W, L 247, LEFT INTO FORREST COUNTRY S/D ON MONK WAY,
R LONGLEAF, L SLASH LN, JUST PAST SHORTLEAF ON RIGHT
TYPE DEVELOPMENT RE-ROOF SFD ESTIMATED COST OF CONSTRUCTION 11500.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES 1
FOUNDATION WALLS ROOF PITCH 5/12 FLOOR
LAND USE & ZONING MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT REAR SIDE
NO. EX.D.U. 1 FLOOD ZONE NA DEVELOPMENT PERMIT NO.

PARCEL ID 15-4S-16-03000-002 SUBDIVISION FOREST COUNTRY S/D
LOT 13 BLOCK A PHASE UNIT TOTAL ACRES 0.87

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

COMMENTS: NOC ON FILE, EXISTNG SFD

AFFIDAVIT ON FILE

Check # or Cash CASH

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 date/app. by 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 date/app. by
Heat & Air Duct Peri. beam (Lintel) Pool
 date/app. by date/app. by date/app. by
Permanent power C.O. Final Culvert
 date/app. by date/app. by date/app. by
Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing
 date/app. by date/app. by date/app. by
Reconnection RV Re-roof
 date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 60.00 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** 60.00

INSPECTORS OFFICE L. H. CLERKS OFFICE CH

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.

Columbia County Building Permit Application

For Office Use Only		Application # <u>1303-24</u>	Date Received <u>3-11-13</u>	By <u>LH</u>	Permit # <u>30837</u>
Zoning Official _____	Date _____	Flood Zone _____	Land Use _____	Zoning _____	
FEMA Map # _____	Elevation _____	MFE _____	River _____	Plans Examiner _____	Date _____
Comments _____					
<input checked="" type="checkbox"/> NOC <input checked="" 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"/> Ellisville Water		<input type="checkbox"/> App Fee Paid	

Septic Permit No. N/A Fax _____

Name Authorized Person Signing Permit Faustin Gallegos Phone 352-615-1519

Address 14280 NW 87th Ave Rd - Ocala FL 32686

Owners Name Denise & Walter Graham Phone 352-867-0007

911 Address 180 SW slash LN, Lake City, FL 32024

Contractors Name FNF Enterprises Inc Phone 352-615-1519

Address 14280 NW 87th Ave Rd - Ocala FL 32686

Fee Simple Owner Name & Address N/A

Bonding Co. Name & Address N/A

Architect/Engineer Name & Address N/A

Mortgage Lenders Name & Address N/A

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

Property ID Number 15-45-16-03000-002 Estimated Cost of Construction \$11,500.00

Subdivision Name Forest Country Lot 13 Block A Unit _____ Phase _____

Driving Directions Hwy 90 to Branford Hwy T/L go to Forest Country Sub. T/L go to stop T/R go to slash T/L go to house on Right

Number of Existing Dwellings on Property 1

Construction of Reroof - SFD Total Acreage _____ Lot Size _____

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

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

Number of Stories _____ Heated Floor Area _____ Total Floor Area _____ 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 2010 and the 2008 National Electrical Code.

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 Must Sign All Applications Before Permit Issuance.)


Owners Signature

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

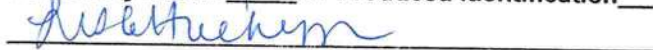
CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.


Contractor's Signature (Permitee)

Contractor's License Number CCE 1327482
Columbia County
Competency Card Number 392 *etc*

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 11 day of March 2013.

Personally known Y or Produced Identification _____


State of Florida Notary Signature (For the Contractor)

SEAL:



Columbia County Property Appraiser

CAMA updated: 2/1/2013

2012 Tax Year

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

Parcel: 15-4S-16-03000-002

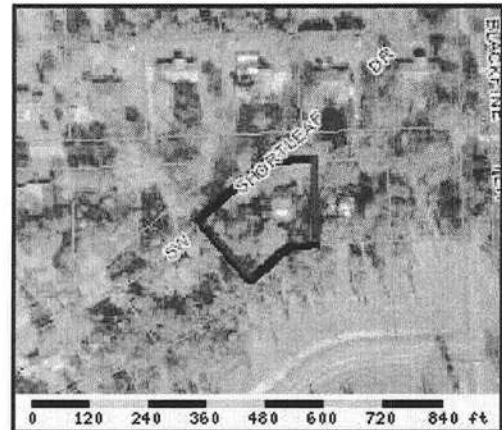
<< Next Lower Parcel

Next Higher Parcel >>

Search Result: 1 of 1

Owner & Property Info

Owner's Name	GRAHAM WALTER I & DENISE L		
Mailing Address	723 SW SISTERS WELCOME RD LAKE CITY, FL 32025		
Site Address	180 SW SLASH LN		
Use Desc. (code)	SINGLE FAM (000100)		
Tax District	3 (County)	Neighborhood	15416
Land Area	0.870 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 13 BLOCK A FOREST COUNTRY SECOND ADDITION. PORTION IN SEC 22 4S-16. WD 1007-1345 & N1/2 OF LOT 12 BLOCK A FOREST COUNTRY SECOND ADDITION ORB 659-806		



Property & Assessment Values

2012 Certified Values		
Mkt Land Value	cnt: (0)	\$29,700.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$134,476.00
XFOB Value	cnt: (5)	\$12,843.00
Total Appraised Value		\$177,019.00
Just Value		\$177,019.00
Class Value		\$0.00
Assessed Value		\$177,019.00
Exempt Value	(code: HX H3)	\$50,000.00
Total Taxable Value	Cnty: \$127,019 Other: \$127,019 Schl:	\$152,019

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
2/17/2004	1007/1345	WD	I	Q		\$195,000.00
2/17/2004	1007/1345	WD	I	Q		\$195,000.00
8/19/1988	659/806	WD	V	Q		\$5,000.00
11/1/1984	562/58	WD	V	Q		\$10,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1985	COMMON BRK (19)	2628	3562	\$132,659.00
Note: All S.F. calculations are based on <u>exterior</u> building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0166	CONC,PAVMT	0	\$2,000.00	0000001.000	0 x 0 x 0	(000.00)

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

Clerk's Office Stamp

Inst: 201312003540 Date: 3/11/2013 Time: 10:19 AM
DC P. DeWitt Cason, Columbia County Page 1 of 1 B: 1250 P: 2291

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 13 block A Forest County Second Addition portion in
Street (job) Address: Sec 22 43-16. WD 1007-1345 & N 1/2 of Lot 12 Block A Forest County
2nd Add.
Orb 659-86
2. General description of improvements: Revolook
3. Owner Information:
 - a) Name and address: Denise Graham
 - b) Name and address of fee simple titleholder (if other than owner) N/A
 - c) Interest in property: owner
4. Contractor Information:
 - a) Name and address: Francis Ballegos
 - b) Telephone No.: 352-615-1515 Fax No. (Opt.): _____
5. Surety Information:
 - a) Name and address: N/A
 - b) Amount of Bond: N/A
 - c) Telephone No.: N/A Fax No. (Opt.): _____
6. Lender:
 - a) Name and address: N/A
 - b) Phone No.: N/A
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: N/A
 - b) Telephone No.: N/A 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(b), Florida Statutes:
 - a) Name and address: N/A
 - b) Telephone No.: N/A 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): N/A

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. Denise Graham
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager
Denise Graham
Printed Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 11 day of March, 2013, by:
Denise Graham as _____ (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 X Type DL-6650-172-56-6240

Notary Signature Lisa Hutchingson Notary Stamp or Seal:



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

PRODUCT APPROVAL SPECIFICATION SHEET

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products.

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
1. EXTERIOR DOORS			
A. SWINGING			
B. SLIDING			
C. SECTIONAL			
D. ROLL UP			
E. AUTOMATIC			
F. OTHER			
2. WINDOWS			
A. SINGLE HUNG			
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. DOUBLE HUNG			
E. FIXED			
F. AWNING			
G. PASS THROUGH			
H. PROJECTED			
I. MULLION			
J. WIND BREAKER			
K. DUAL ACTION			
L. OTHER			
3. PANEL WALL			
A. SIDING			
B. SOFFITS			
C. EIFS			
D. STOREFRONTS			
E. CURTAIN WALLS			
F. WALL LOUVER			
G. GLASS BLOCK			
H. MEMBRANE			
I. GREENHOUSE			
J. OTHER			
4. ROOFING PRODUCTS			
A. ASPHALT SHINGLES	IKO	30 yr. Charcoal	FL.7006.1
B. UNDERLAYMENTS			
C. ROOFING FASTENERS			
D. NON-STRUCTURAL METAL ROOFING			
E. WOOD SHINGLES AND SHAKES			
F. ROOFING TILES			
G. ROOFING INSULATION			
H. WATERPROOFING			
I. BUILT UP ROOFING ROOF SYSTEMS			
J. MODIFIED BITUMEN			
K. SINGLE PLY ROOF SYSTEMS			
L. ROOFING SLATE			
M. CEMENTS-ADHESIVES COATINGS			

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
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N. LIQUID APPLIED ROOF SYSTEMS			
O. ROOF TILE ADHESIVE			
P. SPRAY APPLIED POLYURETHANE ROOF			
Q. OTHER			
5. SHUTTERS			
A. ACCORDION			
B. BAHAMA			
C. STORM PANELS			
D. COLONIAL			
E. ROLL-UP			
F. EQUIPMENT			
G. OTHERS			
6. SKYLIGHTS			
A. SKYLIGHT			
B. OTHER			
7. STRUCTURAL COMPONENTS			
A. WOOD CONNECTORS/ ANCHORS			
B. TRUSS PLATES			
C. ENGINEERED LUMBER			
D. RAILING			
E. COOLERS-FREEZERS			
F. CONCRETE ADMIXTURES			
G. MATERIAL			
H. INSULATION FORMS			
I. PLASTICS			
J. DECK-ROOF			
K. WALL			
L. SHEDS			
M. OTHER			
8. NEW EXTERIOR ENVELOPE PRODUCTS			
A.			
B.			

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


APPLICANT SIGNATURE

3-11-2013
DATE



Columbia County

BUILDING DEPARTMENT

Inspection Affidavit

RE: Permit Number: 30837

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

License #: CCC 1327482

On or about 3-19-13, I did personally inspect the
(Date & time)

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

work at 180 SW slash LN
(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.)

Faustin Gallegos
Signature

STATE OF FLORIDA
COUNTY OF

Sworn to and subscribed before me this 11 day of March, 2013

By Lisa Huchingson, Notary Public, State of Florida

(Print, type or stamp name)

Personally known X or

Produced Identification _____ Type of identification produced. _____



* 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.

#30837

