Columbia County Swimming Pool/Spa Permit Application

1.7.4.14
For Office Use Only Application # 44807 Date Received 3/23 By LH Permit # 39542
Zoning Official A Date 3-70-20 Flood Zone X Land Hoo RI O Zone RE 2
FEMA Map # 17/11 Elevation 17/11 MFE 17/4 River 17/4 Plans Examiner 1.4 Date 3.30.20
Comments
NOC EH Deed or PA 1 Site Plan 1 911 Sheet (If NO Address Exists) Owner Builder Disclosure Statement
Dev Permit # D In Floodway C Letter of Auth. from Contractor F W Comp. letter
Land Owner Affidavit Ellisville Water App Fee Paid Sub VF Form
Notes:
Septic Permit No. 20-0239 or City Water System Fax Peder pods@gmail.co
Applicant (Who will sign/pickup the permit) Ruymond or Hice Reckshone 386 755-2848
Address 158 S.W. Elk Hunter Glen Fort White F132038
Owners Name Mallew Sorensen Phone 561 756 5974
911 Address 228 SW Arrowbert Dr. Lale CIMFI 32024
Contractors Name Raymond Heeler Phone 386 867 4888
Address 158 S.W. Elk Hunter Glen Fort White, Fl
Contractor Email Peeler pools@gmall.com ***Include to get updates on this job.
Fee Simple Owner Name & Address
Bonding Co. Name & Address
Architect/Engineer Name & Address Gdry 6111 426 Sw. Commerce Or. Lake City Fl Mortgage Lenders Name & Address 7 A 32025
Circle the correct power company – FL Power & Light – Clay Elec. – Suwannee Valley Elec. – Duke Energy
Construction of the Constr
Property ID Number 2445 1603114-135 Cost of Construction 35,000
Subdivision Name Cannon Creak Place Lot 35 Block Unit Phase
Driving Directions 47 S-(L) CIR 242 - 12) SN Arrowied Kirks
(2) SW Cannon Crock Or - (1) SW Gerald Conner Or
(2) Sw Arrowsend # 728 Residential OR Commercial
Construction of Total Acreage
Actual Distance of Pool from Property Lines - Front Side Side Side Sear
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 2014 and the 2011 National Electrical Code.
Page 1 of 2 (Both Pages must be submitted together.) Revised 7-1-15

Page 1 of 2 (Both Pages must be submitted together.)

SUBCONTRACTOR VERIFICATION

	2	
APPLICATION/PERMIT #	1	JOB NAME JONEN SEN
		JOB NAME SOMENSEN
	31	

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 <u>REQUIRED</u> 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.aspx

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	Print Name MA	HATT Broom Fledic, 1 ac.	fu E-	Need Lic
Y	Company Name:	HATT BURNS Fledge, INC.	386-365-3688 CE	Liab
cc#_369	License #:	1300 6531 Phone #:	386-385 935-0444	I EX
MECHANICAL/		The state of the s		Need Lic
A/C	Company Name:			I Liab
CC#	License #:	Phono #		- = W/C
PLUMBING/	1.1	31.1		Need
	Print Name	Signature		I Uc
GAS	Company Name:			= Liab = W/C
CC#	License #:	Phone #:		= EX = DE
ROOFING	Print Name	Signature		Need Lic
	Company Name:			☐ Liab
CC#	License #:	Phone #:		T W/C
SHEET METAL	Print Name	Signature		Need Lic
	Company Name:	distriction to		□ Liab
CC#	17 131	Phone #:		I EX I DE
FIRE SYSTEM/	Print Name	Signature		Need Lic
SPRINKLER	Company Name:			I Liab I W/C
CC#	License#:	Phone #:		I DE
SOLAR	Print Name	Signature		Need Uc
	Company Name:	3 (1)		T Lieb
CC#	License #:	Phone #:		EX DE
STATE	Print Name	Signature		Need Lic
SPECIALTY	Company Name:	di didi		_ Liab
CC#	License #:	Phone #:		I EX

Ref: F.S. 440.103; ORD. 2016-30

Inst. Number: 200812008612 Book: 1149 Page: 1211 Date: 5/2/2008 Time: 2:15:00 PM Page 1 of 1

arranty Deed

This Indenture, made this 20 da day of April, 2008 A.D. Inst 200812008512 Date 5/2/2008 Time 2 15 PM
Dog Stamp Deed 210 00
DC P DeWit Cason Columbia County Page 1 of 1 8 11 49 P 1211

Between

ABBA INVESTMENTS, L.L.C., a Florida Limited Liability Company, whose post office address is: 4635 NW 53rd Avenue, Ste 102A, Gainesville, FL 32653; Grantor and Matthew T. Sorensen, whose post office address is: 176 SW Arrowbend Terrace, Lake City, FL 32024, Grantee,

Witnesseth, that the said Grantor, for and in consideration of the sum of Ten and No/100 Dollars (\$10.00), to it in hand paid by the said Grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said Grantee forever, the following described land, situate, lying and being in the County of Columbia. State of Florida, to wit:

Lot 35, of CANNON CREEK PLACE, a subdivision according to the plat thereof recorded in Plat Book 8, Pages 31 through 34, of the Public Records of Columbia County, Florida.

Subject to taxes for the current year, covenants, restrictions and easements of record, if any.

Parcel identification Number: R03114-135

And the said Grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomspever.

And the grantor hereby covenants with said grantee that the grantor is lawfully selzed of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2007.

In Witness Whereof, the said Grantor has caused this instrument to be executed in its name by its duly authorized member the day and year first above written.

> ABBA INVESTMENTS, L.L.C. a Florida Limited Liability Co

Signed and Sealed in Our Presence:

State of

Florida

Columbia Alachum County of

The foregoing instrument was acknowledged before me this _28 day of April, 2008, by Stephen L. Ivy, Manager of ABBA Investments, L.L.C., a Florida Limited Liability Company, on behalf of the company.

He is personally known to me or has produced

Notary Public

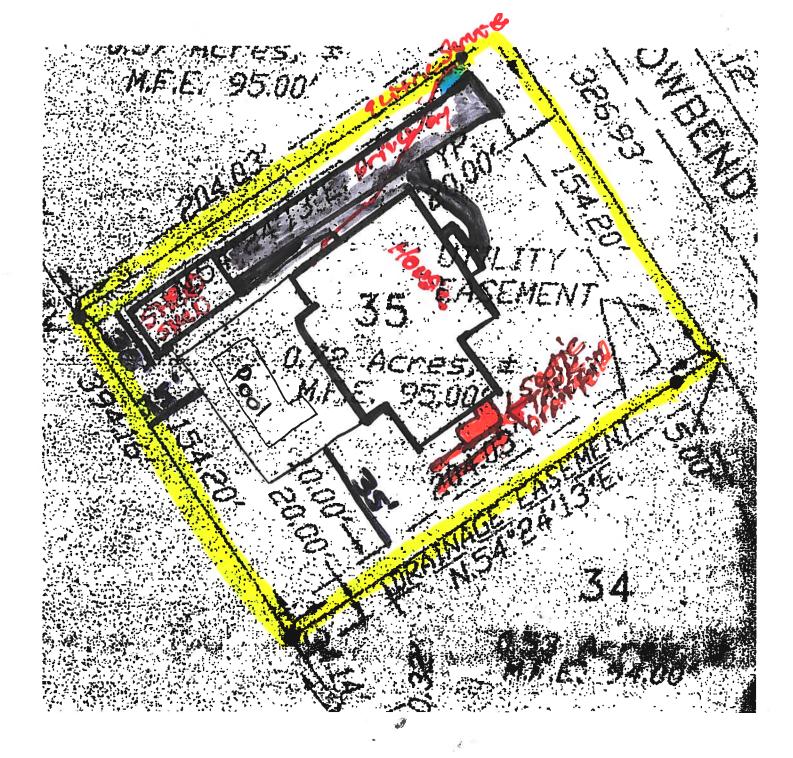
My Commission Expires::

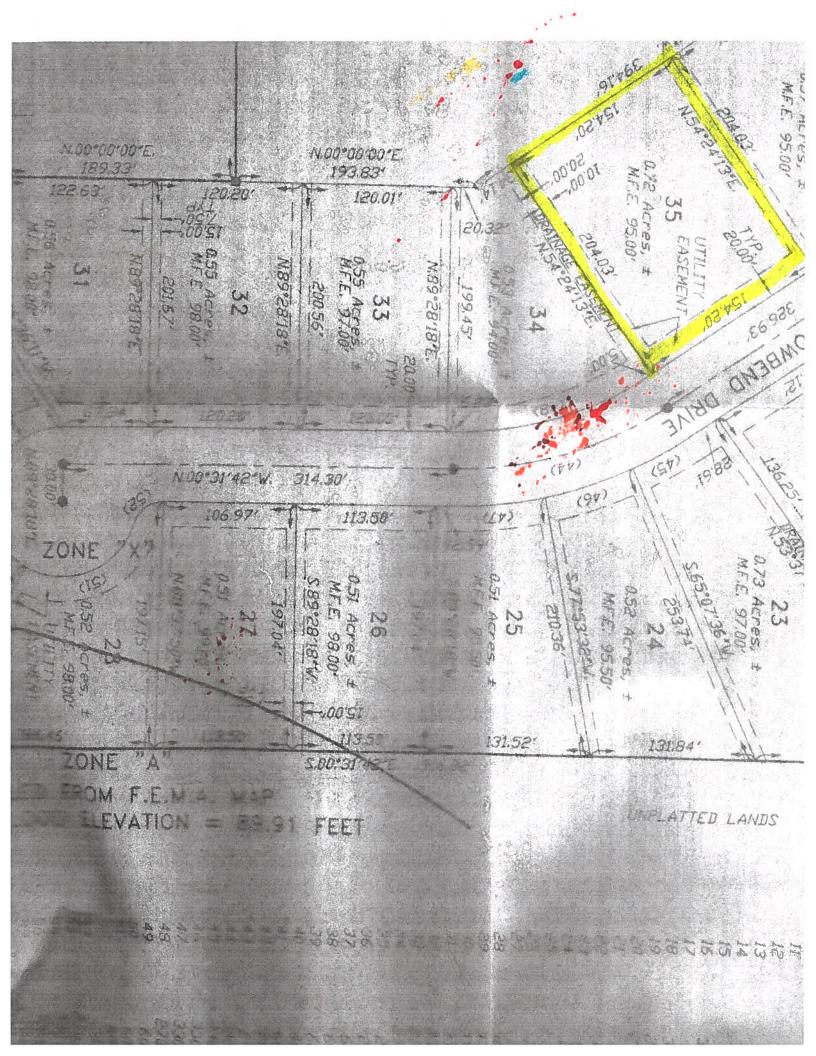
#08-0098A Prepared by & Return to: Matt Rocco Sierra Title, LLC, 619 SW Baya Drive, Suite 102 Lake City, Florida 32025

NOTARY PUBLIC STATE OF FLORIDA S Terri Mady Commission #100571933 Notice: 3682 62, 2011 BOND THE ATLANTIC BONDING CO. INC.

identification.

(Seal)





P TO LIE

COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21, Lake City, FL 32055 Office: 386-758-1008 Fax: 386-758-2160 www.columbiacountyfla.com/BuildingandZoning.asp

NOTICE TO SWIMMING POOL OWNERS

Matt Sorensen	have been informed and I understand that prior to the final inspection
accordance with applicable regulat	ed all the inspections approved and the required fencing installed in ons. The Florida Building Code requires private residential swimming pools, hot water over 24 inches deep to meet the following pool barrier safety feature
requirements:	

- The pool access must be isolated by a barrier at least 4 feet high and installed around the perimeter of the pool.

 Unless the pool is equipped with a safety cover complying with the specifications of American Society for Testing and Materials standard F-1346-91.
 - The barrier shall not have any gaps or openings which would allow a child to crawl under, squeeze through or climb over and must be placed no less than 20 inches from the water's edge.
 - Gates located in the pool barrier must open outward away from the pool and be both self-closing and self
 latching, with a release mechanism not less than 54" above the standing surface at the gate.
 - The barrier must be separate from any other fence, wall, or other enclosure surrounding the yard unless the fence, wall or other enclosure or portion thereof is situated on the perimeter of the pool and meets the pool barrier requirements.
 - Where a wall of a dwelling serves as part of the barrier one of the following shall apply:
 - 1) All doors and first floor windows with a sill height of less than 48 inches providing direct access from the home to the pool must be equipped with an alarm that has a minimum sound pressure rating of 85 decibels at 10 feet. The alarm shall sound immediately upon opening the window or door unless the temporary bypass mechanism is activated.
 - 2) Or; all doors providing direct access from the home to the pool must be equipped with a self-closing, self-latching device with a release mechanism located at least 54 inches above the floor.

According to Florida statutes chapter 515: Residential Swimming Pool Safety Act, failure to comply with these requirements is a misdemeanor of the second degree, punishable by imprisonment for up to 60 days or a fine of up to \$500, except that no penalty shall be imposed if within 45 days after arrest or issuance of a summons or notice to appear, the pool is equipped with the aforementioned safety features and the responsible person attends a drowning prevention education program developed by the Florida Department of Health. I also understand that there are several inspections required in addition to a final inspection for my swimming pool.

Owner Signature / Date

Address: 228 SW Arrowbend

License Number

Contractor Signature / Date

Tax Collector

Columbia County Property Appraiser

updated: 3/9/2020

Parcel: 24-4S-16-03114-135

<< Next Lower Parcel Next Higher Parcel >>

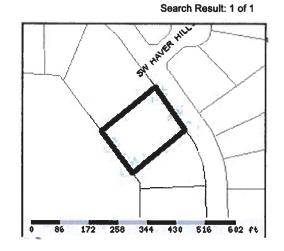
2020 Working Values

Tax Estimator Property Card Parcel List Generator

2019 TRIM (pdf) Interactive GIS Map Prin

Owner & Property Info

Owner's Name	SORENSEN MATTHEW T					
Mailing Address	228 SW ARROWBEND DI LAKE CITY, FL 32024	R				
Site Address	228 SW ARROWBEND DR					
Use Desc. (code)	SINGLE FAM (000100)					
Tax District	2 (County)	Neighborhood	24416			
Land Area	0.720 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 35 CANNON CREE	K PLACE S/D. WD 1056-1326. V	VD 1149-1211				



Property & Assessment Values

2019 Certified Values		
Mkt Land Value	cnt: (0)	\$13,000.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (1)	\$202,665.00
XFOB Value	cnt: (1)	\$3,744.00
Total Appraised Value		\$219,409.00
Just Value		\$219,409.00
Class Value		\$0.00
Assessed Value		\$205,593.00
Exempt Value	(code: HX H3)	\$50,000.00
Total Taxable Value	Other: \$155.5	Cnty: \$155,593 593 Schl: \$180,593

2020 Working Values	(Hide Values)		
Mkt Land Value	cnt: (0)	\$13,000.00	
Ag Land Value	cnt: (1)	\$0.00	
Building Value	cnt: (1)	\$207,377.00	
XFOB Value	cnt: (1)	\$3,744.00	
Total Appraised Value		\$224,121.00	
Just Value		\$224,121.00	
Class Value		\$0.00	
Assessed Value		\$210,322.00	
Exempt Value	(code: HX H3)	\$50,000.00	
Total Taxable Value		Cnty: \$160,322	
	Other: \$160,322	Schl: \$185,322	

NOTE: 2020 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
4/28/2008	1149/1211	WD	V	Q		\$30,000.00
8/22/2005	1056/1326	WD	V	Q		\$79,800.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	2015	(32)	2352	3633	\$202,665.00
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	2015	\$3,744.00	0001872.000	0 x 0 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000100	SFR (MKT)	1 LT - (0000000.720AC)	1.00/1.00/1.00/1.00	\$13,000.00	\$13,000.00

Columbia County Property Appraiser

updated: 3/9/2020

STATE OF FLORIDA COUNTY OF Claynon CITY OF Lace City STATE OF FLORIDA COUNTY OF Claynon CITY OF Lace City And in accordance
STATE OF FLORIDA COUNTY OF COMPANY and in accordance
THE UNDERSIGNED hereby gives notice that improvement(s) will be made to certain real property, and in accordance with Chapter713. Florida Statutes, the following information is provided in this Notice of Commencement.
DESCRIPTION OF PROPERTY: TOWNSHIP - RANGE - TOWNSHIP - TOWN
101 3 5 BLOCK
TAX PARCEL# 34 45 16 03114-135 PLATBOOK: MAP PAGE# SUBDIVISION: CAPON CARRY PLACE TAX PARCEL# 34 45 16 03114-135 PLATBOOK: MAP PAGE# STRUCTAR DOPESS:
SUBDIVISION: CALDOW CAREK PLACE STREETADDRESS: 326 SN: Arrowserd D LAC CIM FI
GENERAL DESCRIPTION OF IMPROVEMENT:
TO CONSTRUCT: SWIMMING POOL- RESIDENTIAL
OWNER INFORMATION: OWNER(S)NAME: Matter T. SOVENSED ADDRESS: 32550 ATTENDED TO STATE EL ZIP 32024
OWNER(S)NAME: Matters 1. PHONE 561-156 5974
INTEREST IN THE PROPERTY: Owner
WALL TO THE PROPERTY OF THE PR
FEE SIMPLE TITLEHOLDER NAME. FEE SIMPLE TITLEHOLDER ADDRESS:(IF OTHER THAN OWNER)
CONTRACTOR NAME: Peeler Pools, Inc
ADDDECC: 188 SW Fik Hunter Glen Ft. White, Fl 32038 380-733-2040
BONDING COMPANY: N/AADDRESS: N/A PHONE NUMBER N/A
CITY: N/A STATE N/A ZIP CODE: N/A
LENDER NAME: NOWE PHONE
ADDRESS: CTATE - 7ID
CITY:STATE
Prepared by: Peeler Pools, Inc. (Raymond Peeler)
Return to : Peeler Pools, Inc. 158 SW Elk Hunter Glen Ft. White, Fl 32038 386-755-2848
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: None ADDRESS: N/A
In addition to himself Owner designates: Raymond Peeler of Peeler Pools, Inc.
158 SW Elk Hunter Glen Ft. White, Fl 32038 380-755-2848
to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.
de l'annual de l'annual de l'annual fierd
Expiration date is 1 year from date of recording unless a different date is specified.
SIGNATURE OF OWNER Malefred (Consor
SWORN to and subscribed before me this day of Mai year of 20.2
Notary Public My commission expires ALICE BURKE PEELER
Signature: Commission # GG 122000
Expires September 15, 2021
For ruck Bonded Thru Budget Hotary Services

***WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOURPAYING 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 AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

80-0339

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DH 4015, 08/09 (Obsoletes previous editions which may not be used) incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)

Page 2 of 4



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

PERMIT NO.	2560·0k
DATE PAID:	322.50
FEE PAID:	(40.00
RECEIPT #:	-
AP 147	5605

APPLICATION :	FOR CONSTRUCTION PERM		AP 1475605
APPLICATION FOR: [] New System [] E. [] Repair [] A	xisting System [] bandonment []	Holding Tank Temporary	
APPLICANT: Paper P	Heror Mallew	Sovensen	
AGENT: Raymond O			PHONE: 755-2849
MAILING ADDRESS:	8 5.W. Ell		
TO BE COMPLETED BY APPLICANT BY A PERSON LICENSED PURSUAN APPLICANT'S RESPONSIBILITY TO PLATTED (MM/DD/YY) IF REQUES	T TO 489.105(3)(m) OR 489 O PROVIDE DOCUMENTATION O TING CONSIDERATION OF STA	D AGENT. SYSTEM 0.552, FLORIDA ST 0F THE DATE THE 1 ATUTORY GRANDFATE	48 MUST BE CONSTRUCTED FATUTES. IT IS THE LOT WAS CREATED OR HER PROVISIONS.
PROPERTY INFORMATION			
LOT: 35 BLOCK:	subdivision: Cannon	irect flace	PLATTED:
PROPERTY ID #: 244516	03114135 zoning:	I/M OR	equivalent: [Y / N
PROPERTY SIZE: 12 ACRES	WATER SUPPLY: [] PRIVA	TE PUBLIC []	<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 38	T /		
PROPERTY ADDRESS: 2285	in Arrowhead.	Or. Lalle	Cly Fl
DIRECTIONS TO PROPERTY: 47	5-L CR242-(E	2) SW Arron	head Terr-
(DSW Carron God	tor-195WGE	rald Conner.	Or-
(1) SW Arrowber	O Dr. # 2	28	
BUILDING INFORMATION	[\sqrt{residential}	[] COMMERCIAL	ւ
Unit Type of No Establishment	No. of Building Consequence Bedrooms Area Sqft Ta		utional System Design 64E-6, FAC
1 0001			
2			
3			
4			
[] Floor/Equipment Drains	[] Other (Specify)		
SIGNATURE: Page 6) (tool	D.	ATE: 3-23-700
V			