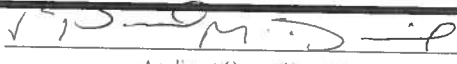


DATE 06/06/2019

# Columbia County Building Permit

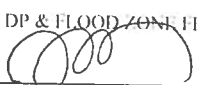

This Permit Must Be Prominently Posted on Premises During Construction

**PERMIT**  
 000038209

APPLICANT	PAUL MCDANIEL		PHONE	386.752.4072	
ADDRESS	2230	SE BAYA DR., STE. 101	LAKE CITY	FL	32025
OWNER	ANNIE FULLER		PHONE	386.855.0888	
ADDRESS	254	SW EMERALD ST	LAKE CITY	FL	32024
CONTRACTOR	L. DON REED		PHONE	386.752.4072	
LOCATION OF PROPERTY	90-W TO SR.247-S.11 TO KIRBY.11 TO EMERALD.TR ON L. @ ADDRESS 254.				
TYPE DEVELOPMENT	ROOF OVERLAY/SFD		ESTIMATED COST OF CONSTRUCTION	0.00	
HEATED FLOOR AREA			TOTAL AREA	HEIGHT	STORIES
FOUNDATION	WALLS		ROOF PITCH	6/12	FLOOR
LAND USE & ZONING			MAX. HEIGHT		
Minimum Set Back Requirements:	STREET-FRONT		REAR	SIDE	
NO. EX.D.U.	1	FLOOD ZONE	DEVELOPMENT PERMIT NO.		
PARCEL ID	11-4S-16-02919-145		SUBDIVISION	EMERALD FOREST	
LOT	45	BLOCK	PHASE	2	UNIT
				TOTAL ACRES	0.51
CCC1330117					
Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor		
		JLW	N		
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident	Time/STUP No.
COMMENTS:					
					Check # or Cash 3393

## FOR BUILDING & ZONING DEPARTMENT ONLY

Temporary Power	Foundation	Monolithic	(Footer Slab)
date/app. by	date/app. by	date/app. by	
Under slab rough-in plumbing	Slab	Sheathing/Nailting	
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 \$	0.00	CERTIFICATION FEE \$	0.00	SURCHARGE FEE \$	0.00
MISC. FEES \$	75.00	ZONING CERT. FEE \$		FIRE FEE \$	0.00
PLAN REVIEW FEE \$		DP & FLOOD ZONE FEE \$		CULVERT FEE \$	
				<b>TOTAL FEE</b>	75.00
INSPECTORS OFFICE			CLERK'S 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 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 INSPECTION.

**The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.**

CK# 3393

**Columbia County Building Permit Application**  
**Re-Roof's, Roof Repairs, Roof Over's**

<b>For Office Use Only</b>	Application # <u>1906-23</u>	Date Received <u>9/6</u>	By <u>[Signature]</u>	Permit # <u>38209</u>
Plans Examiner _____ Date _____ <input checked="" type="checkbox"/> NOC <input type="checkbox"/> Deed or PA <input type="checkbox"/> Contractor Letter of Auth. <input type="checkbox"/> F W Comp. letter <input checked="" type="checkbox"/> Product Approval Form <input type="checkbox"/> Sub VF Form <input type="checkbox"/> Owner POA <input type="checkbox"/> Corporation Doc's and/or Letter of Auth.				
Comments _____				

Applicant (Who will sign/pickup the permit) Paul McDaniel FAX 386-755-7272  
 Address 2230 SE Baya Dr. Ste. 101 Lake City, FL 32025 Phone 386-752-4072

Owners Name Annie Fuller Phone 386-855-0888  
 911 Address 254 SW Emerald St. Lake city, FL 32024

Contractors Name Don Reed Construction, Inc Phone 386-752-4072  
 Address 2230 SE Baya Dr. Ste. 101 Lake City, FL 32025

Contractors Email ~~bevroed.drc@gmail.com~~ kalie.drc@gmail.com \*\*\*Include to get updates for this job.

Fee Simple Owner Name & Address \_\_\_\_\_  
 Bonding Co. Name & Address \_\_\_\_\_  
 Architect/Engineer Name & Address \_\_\_\_\_  
 Mortgage Lenders Name & Address \_\_\_\_\_

Property ID Number 11-45-16-02919-145  
 Subdivision Name Emerald Forest Lot 45 Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase 2

Driving Directions Head N. on NE Hernando Ave toward NE Justice St, TL  
onto NE Madison St, TL at the 1<sup>st</sup> cross st onto N. Marion Ave, TR  
onto US-90 W/W Duval St, TL onto FL-2475, TL onto SW Kirby Ave, TR onto  
SW Emerald St, house on left

Construction of (circle) Re-Roof - Roof repairs - Roof Overlay or Other \_\_\_\_\_  
 Cost of Construction \$9,390.00 \_\_\_\_\_ Commercial OR ☒ Residential

Type of Structure (House; Mobile Home; Garage; Exxon) \_\_\_\_\_

Roof Area (For this Job) SQ FT 1931 Roof Pitch 6 /12, \_\_\_\_\_ /12 Number of Stories \_\_\_\_\_

Is the existing roof being removed No If NO Explain \_\_\_\_\_

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) Metal

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: 2014 Florida Building 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 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.

Ann Fuller  
Print Owners Name

Ann Fuller  
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.

[Signature]  
Contractor's Signature

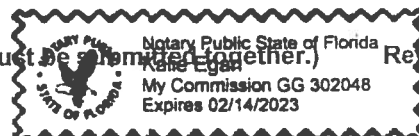
Contractor's License Number CCC1330117  
Columbia County  
Competency Card Number \_\_\_\_\_

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 28 day of May 2019

Personally known X or Produced Identification \_\_\_\_\_

Kalu Egan  
State of Florida Notary Signature (For the Contractor)

SEAL:



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. Statewide approved products are listed online @ [www.floridabuilding.org](http://www.floridabuilding.org)

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
<b>1. EXTERIOR DOORS</b>			
A. SWINGING			
B. SLIDING			
C. SECTIONAL/ROLL UP			
D. OTHER			
<b>2. WINDOWS</b>			
A. SINGLE/DOUBLE HUNG			
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. FIXED			
E. MULLION			
F. SKYLIGHTS			
G. OTHER			
<b>3. PANEL WALL</b>			
A. SIDING			
B. SOFFITS			
C. STOREFRONTS			
D. GLASS BLOCK			
E. OTHER			
<b>4. ROOFING PRODUCTS</b>			
A. ASPHALT SHINGLES			
B. NON-STRUCTURAL METAL	Tri-County	Metal	4595.3 R2
C. ROOFING TILES			
D. SINGLE PLY ROOF			
E. OTHER			
<b>5. STRUCTURAL COMPONENTS</b>			
A. WOOD CONNECTORS			
B. WOOD ANCHORS			
C. TRUSS PLATES			
D. INSULATION FORMS			
E. LINTELS			
F. OTHERS			
<b>6. NEW EXTERIOR ENVELOPE PRODUCTS</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) 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.

Contractor OR Agent Signature

Date

NOTES: \_\_\_\_\_

# Columbia County Property Appraiser

Jeff Hampton

2018 Tax Roll Year

updated: 5/9/2019

Parcel: << 11-4S-16-02919-145 >>

Aerial Viewer Pictometry Google Maps

## Owner & Property Info

Result: 1 of 1

Owner	FULLER ANNIE L 254 SW EMERALD ST LAKE CITY, FL 32024		
Site	254 EMERALD ST,		
Description*	LOT 45 EMERALD FOREST PHASE 2. ORB 764-912, DC 1120-2718 (ERNEST FULLER)		
Area	0.51 AC	S/T/R	11-4S-16E
Use Code**	SINGLE FAM (000100)	Tax District	2

\*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

\*\*The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

## Property & Assessment Values

2018 Certified Values		2019 Working Values	
Mkt Land (1)	\$14,500	Mkt Land (1)	\$16,000
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (1)	\$69,555	Building (1)	\$69,738
XFOB (3)	\$2,769	XFOB (3)	\$2,769
Just	\$86,824	Just	\$88,507
Class	\$0	Class	\$0
Appraised	\$86,824	Appraised	\$88,507
SOH Cap [?]	\$777	SOH Cap [?]	\$1,481
Assessed	\$85,403	Assessed	\$87,026
Exempt	HX H3 OTHER \$50,500	Exempt	HX H3 OTHER \$50,500
Total Taxable	county:\$34,903 city:\$34,903 other:\$34,903 school:\$59,903	Total Taxable	county:\$36,526 city:\$36,526 other:\$36,526 school:\$61,526



## ▼ Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
8/28/1992	\$61,900	764/0912	WD	I	Q	
8/28/1992	\$12,000	764/0910	WD	V	Q	

## ▼ Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	1	SINGLE FAM (000100)	1992	1170	1931	\$69,738

\*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

## ▼ Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0166	CONC,PAVMT	0	\$1,344.00	960.000	60 x 16 x 0	(000.00)
0296	SHED METAL	2009	\$300.00	1.000	0 x 0 x 0	(000.00)



# NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

11-45-16-02919-145

Clerk's Office Stamp

Inst: 201912012683 Date: 06/06/2019 Time: 10:51AM  
Page 1 of 1 B: 1385 P: 2676. P.DeWitt Cason, Clerk of Court  
Columbia, County, By: PT  
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): 11-45-16-02919-145  
a) Street (job) Address: 254 SW Emerald St. Lake City, FL 32024
2. General description of improvements: Metal
3. Owner Information or Lessee information if the Lessee contracted for the improvements:  
a) Name and address: Annie Fuller 254 SW Emerald St. Lake City, FL 32024  
b) Name and address of fee simple titleholder (if other than owner):  
c) Interest in property: owner
4. Contractor Information  
a) Name and address: Don Reed Construction, Inc 2230 SE Baya Dr. Ste. 101 Lake City, FL 32025  
b) Telephone No.: 386-752-4072
5. Surety Information (if applicable, a copy of the payment bond is attached):  
a) Name and address:  
b) Amount of Bond:  
c) Telephone No.:
6. Lender  
a) Name and address:  
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:  
b) Telephone No.:
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: \_\_\_\_\_ OF \_\_\_\_\_  
b) Telephone No.:
9. Expiration date of Notice of Commencement (the expiration date will be 90 days 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. Annie Fuller  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager

Annie Fuller  
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 28 day of May, 2019, by:  
\_\_\_\_\_  
(Name of Person) as \_\_\_\_\_ (Type of Authority) for Annie Fuller  
(name of party on behalf of whom instrument was executed)

Personally Known X OR Produced Identification \_\_\_\_\_ Type \_\_\_\_\_

Notary Signature Kalu Egan No. \_\_\_\_\_

