

DATE 02/23/2009

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000027649

APPLICANT ROBERT OGLES PHONE 364-4838
 ADDRESS 18709 CR 136 FL 32060
 OWNER DAVID RODRIQUEZ PHONE 755-7573
 ADDRESS 291 SW ACE LANE LAKE CITY FL 32025
 CONTRACTOR ROBERT OGLES PHONE 364-4838
 LOCATION OF PROPERTY 47S, TL ON ACE LANE, 3RD HOUSE ON RIGHT

TYPE DEVELOPMENT RE-ROOF ON SFD ESTIMATED COST OF CONSTRUCTION 6500.00
 HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT _____ STORIES _____
 FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____
 LAND USE & ZONING _____ MAX. HEIGHT _____
 Minimum Set Back Requirments: STREET-FRONT _____ REAR _____ SIDE _____
 NO. EX.D.U. _____ FLOOD ZONE N/A DEVELOPMENT PERMIT NO. _____

PARCEL ID 07-4S-17-08120-004 SUBDIVISION COUNTRY VILLAGE
 LOT 4 BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 0.75

RC29027141
 Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
 EXISTING _____ X09-050 _____ CS _____ HD _____ N _____
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: NOC ON FILE

Check # or Cash 4123

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

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

BUILDING PERMIT FEE \$ 35.00 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** 35.00

INSPECTORS OFFICE *Gene Tedola* 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. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"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>0902-27</u>	Date Received <u>2/23/09</u>	By <u>Gr</u>	Permit # <u>27649</u>
Zoning Official _____	Date _____	Flood Zone _____	Land Use _____	Zoning _____	
FEMA Map # _____	Elevation _____	MFE _____	River _____	Plans Examiner _____	Date _____
Comments _____					
<input type="checkbox"/> NOC <input type="checkbox"/> EH <input type="checkbox"/> Deed or PA <input type="checkbox"/> Site Plan <input type="checkbox"/> State Road Info <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 _____	Road/Code _____	
School _____		= TOTAL _____			

Septic Permit No. _____ Fax 364-9361

Name Authorized Person Signing Permit Robert L. Oyles Phone 364-4838

Address 18709 CR 136 LIVE OAK PL 32060

Owners Name David Rodriguez Phone 755-7573

911 Address 291 SW ACE LN LAKE CITY FL 32026

Contractors Name Oyles Construction Phone 364-4830

Address SAME AS ABOVE

Fee Simple Owner Name & Address DAVID RODRIGUEZ

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 2009 R 07-45-17-08120-004 Estimated Cost of Construction 6500⁰⁰

Subdivision Name COUNTRY VILLAGE Lot 4 Block _____ Unit _____ Phase _____

Driving Directions S ON Hwy 477 to ACE LN on LEFT AFTER BINGO STATION turn and go to Address on Right

Number of Existing Dwellings on Property 0

Construction of Re-roof SFD Total Acreage _____ Lot Size 4

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

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

Number of Stories 1 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.

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.

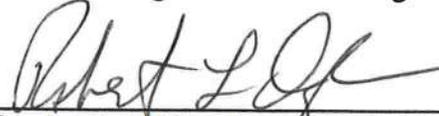
WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY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

OWNERS CERTIFICATION: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws and regulating construction and zoning. I further understand the above written responsibilities in Columbia County for obtaining this Building Permit.



Owners Signature

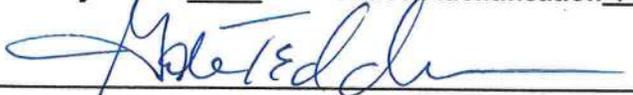
CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.



Contractor's Signature (Permitee)

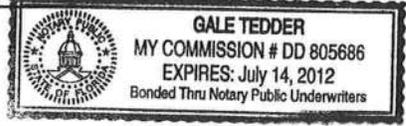
RBC 29003277
RRC 29027141
Contractor's License Number RC 000133
Columbia County
Competency Card Number 7

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 23 day of Feb 2009.
Personally known _____ or Produced Identification FDL 0242-772-55-341-0



State of Florida Notary Signature (For the Contractor)

SEAL:





STATE OF FLORIDA AC# 3328346
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

RC29027141 08/07/07 070068676

REGISTERED ROOFING CONTRACTOR
OGLES, ROBERT LESLEE
OGLES CONSTRUCTION AND ROOFING IN
(INDIVIDUAL MUST MEET ALL LOCAL
LICENSING REQUIREMENTS PRIOR
TO CONTRACTING IN ANY AREA)

HAS REGISTERED under the provisions of Ch. 489
Expiration date: AUG 31, 2009 L07080701328



STATE OF FLORIDA AC# 3328338
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

RB29003277 08/07/07 070068675

REGISTERED BUILDING CONTRACTOR
OGLES, ROBERT LESLEE
OGLES CONSTRUCTION AND ROOFING IN
(INDIVIDUAL MUST MEET ALL LOCAL
LICENSING REQUIREMENTS PRIOR
TO CONTRACTING IN ANY AREA)

HAS REGISTERED under the provisions of Ch. 489
Expiration date: AUG 31, 2009 L07080701320

@ CAM110M01 S CamaUSA Appraisal System Columbia County
 2/23/2009 10:14 Property Maintenance 17550 Land 001
 Year T Property Sel 77553 Bldg 001
 2009 R 07-45-17-08120-004 ... * 2400 Xfea 002
 Owner BENABE ARLENE D & + Conf 97503 TOTAL B*
 Addr DAVID RODRIGUEZ HX
 291 SW ACE LANE -Cap?- Total Acres
 SOH 10% ApYr ERnwl ARnwl S/C Notc
 City,St LAKE CITY FL Zip 32025 Y
 Country (PUD1) (PUD2) (PUD3) MKTA06
 pud4 pud5 pud6
 Appr By TW Date 5/14/2004 AppCode UseCd 000100 SINGLE FAMILY
 TxDist Nbhd MktA ExCode Exemption/% TxCode Units Tp
 002 7417.02 06 HX 25000
 CENTRY VIL
 House# 291 Street ACE MD LN Dir SW #
 - City LAKE CITY
 Subd N/A Condo .00 N/A
 Sect 7 Twn 4S Rnge 17 Subd Blk Lot
 Legals LOT 4 COUNTRY VILLAGE S/D. ORB 501-46, 693-337,
 Map# 97C Mnt 2/16/2009 WANDA
 F1=Task F2=ExTx F3=Exit F4=Prompt F11=Docs F10=GoTo PgUp/PgDn F24=More

Shingles ~~*~~ F1673
 Felt F4673
 EAVE DRIP
 VALLEY METAL
 1 1/4" SHINGLES NAILS
 PLASTIC CAP DRY-IN

3200 square feet

NOTICE OF COMMENCEMENT

County Clerk's Office Stamp or Seal

Tax Parcel Identification Number 2009-R-07-4S-17-08120-004

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 #4 Country Village #D
a) Street (job) Address: ORIS 501-46, 693-337

2. General description of improvements: REROOF

3. Owner Information

a) Name and address: DAVID RODRIGUEZ
b) Name and address of fee simple titleholder (if other than owner) 291 SW ACE LN LAKE CITY FL 32025
c) Interest in property _____

4. Contractor Information

a) Name and address: OBLES CONSTRUCTION AND ROOFING INC
b) Telephone No.: 18709 CR 136 LIVE OAK FL Fax No. (Opt.) 386-364-4838-office
364-9361-FAX

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: OBLES CONSTRUCTION AND ROOFING INC
b) Telephone No.: 364-4838 Fax No. (Opt.) 364-9361

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. [Signature]
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
DAVID RODRIGUEZ
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 23rd day of FEB., 20 09, by:
David Rodriguez 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 DC Type _____
Notary Signature [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.

[Signature]
Signature of Natural Person Signing (in line #10 above.)