

**Columbia County New Building Permit Application**

1826

For Office Use Only Application # 43692 Date Received 10/2 By [Signature] Permit # 38882  
 Zoning Official LW/BS Date 10-7-19 Flood Zone AE Land Use ESA Zoning ESA-2  
 FEMA Map # 0466C Elevation AFE 33' MFE 34' River Stafe Plans Examiner T.C. Date 10-16-19  
 Comments One At Rise Rec'd, Need Devoltn Certificate on Finished Const. before Power including Machinery  
☒ NOC ☒ EH ☒ Deed or PA ☒ Site Plan ☐ State Road Info ☒ Well letter ☒ 911 Sheet ☐ Parent Parcel #             
☒ Dev Permit # 19-008 ☐ In Floodway ☒ Letter of Auth. from Contractor ☐ E W Comp. letter  
☐ Owner Builder Disclosure Statement ☐ Land Owner Affidavit ☐ Ellisville Water ☐ App Fee Paid ☒ Sub VF Form

Septic Permit No. 19-0810 OR City Water ☐ Fax           

Applicant (Who will sign/pickup the permit) Sam Keen SLK Const. Inc. Phone 386 365 3646

Address 764 SW Riverside Ave Ft White FL 32038

Owners Name Maximillian S + Kristin C. Shokat Phone 229-236-2288

911 Address 2912 SW Santa Fe Dr. Fort White FL 32038

Contractors Name Guy W. Williams Phone 386-365-3646

Address 764 SW Riverside Ave Ft White FL 32038

Contractor Email SLKConstruction@hotmail.com \*\*\*Include to get updates on this job

Fee Simple Owner Name & Address NA

Bonding Co. Name & Address NA

Architect/Engineer Name & Address Mark Disoway DE 163 SW Midtown Place Suite 103 Lake City FL 32025

Mortgage Lenders Name & Address NA

Circle the correct power company ☐ FL Power & Light ☒ Clay Elec. ☐ Suwannee Valley Elec. ☐ Duke Energy

Property ID Number 00-00-0200644-000 Estimated Construction Cost 240,000.00

Subdivision Name Three Rivers Estates Lot 23 Block - Unit 7 Phase -

Driving Directions from a Major Road 27 to Riverside Ave Left down to Santa Fe Dr Right down to end of Rd Right down to sign on Left

Construction of New Home Commercial OR ☒ Residential

Proposed Use/Occupancy Home Number of Existing Dwellings on Property 0

Is the Building Fire Sprinkled? NO If Yes, blueprints included            Or Explain           

Circle Proposed ☐ Culvert Permit or ☒ Culvert Waiver or ☐ D.O.T. Permit or ☒ Have an Existing Drive

Actual Distance of Structure from Property Lines - Front 140 Side 10 Side 10 Rear 45 to River

Number of Stories 1 Heated Floor Area 1535 Total Floor Area 1880 Acreage 0.48

Zoning Applications applied for (Site & Development Plan, Special Exception, etc.)           

SCANNED

**Columbia County Building Permit Application**

**CODE: Florida Building Code 2017 and the 2014 National Electrical Code.**

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 pursued in good faith or a permit has been issued.

**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.

Max Shokat  
Print Owners Name

[Signature]  
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

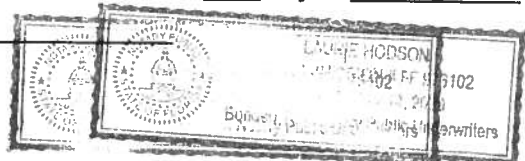
Contractor's License Number CBC050690  
Columbia County  
Competency Card Number 548

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 2ND day of OCTOBER 2019.

Personally known ☒ or Produced Identification ☐

[Signature]  
State of Florida Notary Signature (For the Contractor)

SEAL:



# NOTICE OF COMMENCEMENT

Tax Parcel Identification Number: \_\_\_\_\_

Clerk's Office Stamp

Inst: 201912022383 Date: 09/25/2019 Time: 1:49PM  
Page 1 of 1 B: 1395 P: 595, P. DeWitt Cason, Clerk of Court Colur  
County, By: BD  
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): 00-00-00-00644-000  
a) Street (job) Address: \_\_\_\_\_
2. General description of improvements: New Home
3. Owner Information or Lessee information if the Lessee contracted for the improvements:  
a) Name and address: Shokat Maximilian S & Kristin 253 Roundtree Rd. Thomasville GA, 31792  
b) Name and address of fee simple titleholder (if other than owner) NA  
c) Interest in property OWNERS
4. Contractor Information  
a) Name and address: SLK Construction Inc. 764 SW Riverside Ave, Ft White FL, 32038  
b) Telephone No.: 386-365-3646
5. Surety Information (if applicable, a copy of the payment bond is attached):  
a) Name and address: NA  
b) Amount of Bond: NA  
c) Telephone No.: NA
6. Lender  
a) Name and address: NA  
b) Phone No.: NA
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: NA  
b) Telephone No.: NA
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 1 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.**

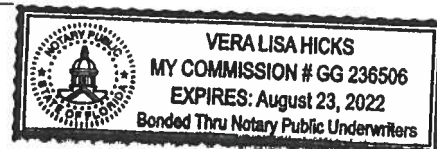
STATE OF FLORIDA  
COUNTY OF COLUMBIA

10. [Signature]  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager  
Max Shokat  
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 12 day of Sept, 2019, by:  
Max Shokat as \_\_\_\_\_ for \_\_\_\_\_  
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

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

Notary Signature [Signature] Notary Stamp or Seal:



**Columbia County Property Appraiser**

Jeff Hampton

**2018 Tax Roll Year**

updated: 6/25/2019

Parcel: &lt;&lt; 00-00-00-00644-000 &gt;&gt;

i Rise cat

**Owner & Property Info**

Owner	SHOKAT MAXIMILIAN S & KRISTIN 253 ROUNDTREE RD THOMASVILLE, GA 31792		
Site			
Description*	LOT 23 UNIT 7 THREE RIVERS ESTATES. ORB 309-429,30. WD 1263-2505		
Area	0.98 AC	S/T/R	27-6S-15
Use Code**	VACANT (000000)	Tax District	3

\*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 &amp; Zoning office for specific zoning information.

**Property & Assessment Values**

2018 Certified Values		2019 Working Values	
Mkt Land (1)	\$119,700	Mkt Land (1)	\$119,700
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (0)	\$0	Building (0)	\$0
XFOB (0)	\$0	XFOB (0)	\$0
Just	\$119,700	Just	\$119,700
Class	\$0	Class	\$0
Appraised	\$119,700	Appraised	\$119,700
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$119,700	Assessed	\$119,700
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$119,700 city:\$119,700 other:\$119,700 school:\$119,700	Total Taxable	county:\$119,700 city:\$119,700 other:\$119,700 school:\$119,700

**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
10/22/2013	\$145,500	1263/2505	WD	V	Q	01

**▼ Building Characteristics**

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
NONE						

**▼ Extra Features & Out Buildings (Codes)**

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

**▼ Land Breakdown**

Land Code	Desc	Units	Adjustments	Eff Rate	Land Value
000020	VAC/WATER (MKT)	140.000 FF - (0.980 AC)	1.00/1.00 1.00/0.90	\$855	\$119,700

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b) Name and address of fee simple titleholder (if other than owner): NA  
c) Interest in property: OWNERS
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a) Name and address: NA  
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6. Lender  
a) Name and address: NA  
b) Phone No.: NA
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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:  
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STATE OF FLORIDA  
COUNTY OF COLUMBIA

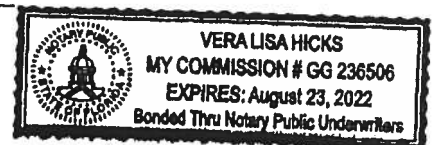
10. [Signature]  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager  
Max Shokat  
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 12 day of Sept, 2019, by:

Max Shokat as \_\_\_\_\_ for \_\_\_\_\_  
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

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

Notary Signature [Signature] Notary Stamp or Seal:





## Legend

SRWMD Wetlands



2018Aerials



Parcels



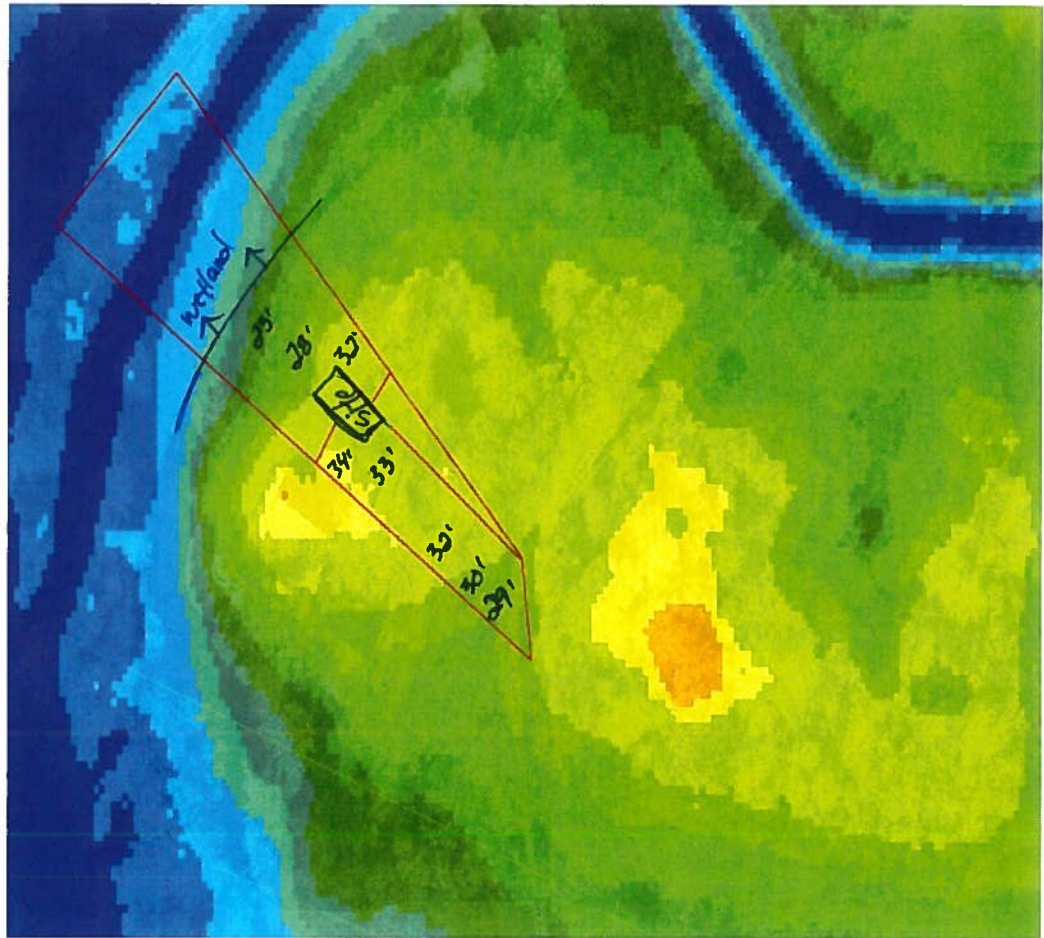
SectionTownshipAndRange

LidarElevations



# Columbia County, FLA - Building & Zoning Property Map

Printed: Mon Oct 07 2019 10:20:13 GMT-0400 (Eastern Daylight Time)



## Parcel Information

Parcel No: 00-00-00-00644-000

Owner: SHOKAT MAXIMILIAN S & KRISTI

Subdivision: THREE RIVERS ESTATES UNIT 7

Lot:

Acres: 0.980930269

Deed Acres:

District: District 2 Rocky Ford

Future Land Uses: Environmentally Sensitive Areas -1

Flood Zones: AE

Official Zoning Atlas: ESA-2

Roads

Roads

others

Dirt

Interstate

Main

Other

Paved

All data, information, and maps are provided "as is" without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implied warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.

# SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # 43692 JOB NAME Shokat

**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 REQUIRED 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.

<b>ELECTRICAL</b>  <input checked="" type="checkbox"/>	<b>37</b> <input checked="" type="checkbox"/>	Print Name: <u>Donald R. Hollingsworth</u> Signature: <u>[Signature]</u> Company Name: <u>Holly Electric Inc.</u> License #: <u>EC 13005429</u> Phone #: <u>386-755-5944</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>MECHANICAL</b>  <b>A/C</b>	<input checked="" type="checkbox"/>	Print Name: <u>Harry Miesley</u> Signature: <u>[Signature]</u> Company Name: <u>Harry's Heating &amp; Air Inc</u> License #: <u>PHOC 30316</u> Phone #: <u>386-752-2308</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>PLUMBING/</b>  <b>GAS</b>	<input checked="" type="checkbox"/>	Print Name: <u>Cody Barrs</u> Signature: <u>[Signature]</u> Company Name: <u>Barrs Plumbing</u> License #: <u>CFC 1427145</u> Phone #: <u>386 823-0509</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>ROOFING</b>	<input checked="" type="checkbox"/>	Print Name: <u>Darin L. Summerlin</u> Signature: <u>[Signature]</u> Company Name: <u>Summerlin Roofing Inc.</u> License #: <u>CCC 1324192</u> Phone #: <u>386-288-5426</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>SHEET METAL</b>	<input type="checkbox"/>	Print Name: _____ Signature: _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>FIRE SYSTEM/</b>  <b>SPRINKLER</b>	<input type="checkbox"/>	Print Name: _____ Signature: _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>SOLAR</b>	<input type="checkbox"/>	Print Name: _____ Signature: _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>STATE</b>  <b>SPECIALTY</b>	<input type="checkbox"/>	Print Name: _____ Signature: _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE



## 1-FOOT RISE CERTIFICATION

Owner: Maximillian S. and Kristin Shokat

Property Address: Lot 23, Unit 7, Three Rivers Estates

Property Acreage: 0.98 Acres

Parcel No.: 00-00-00-00644-000

Structures in SFHA Zone AE: 32'x63' Residence with lowest existing ground elevation adjacent to the structure at approximately 26.5' NAVD sloping up to 31.5' NAVD.

Elevation of 100-Year Storm in Floodplain: 33.0' NAVD

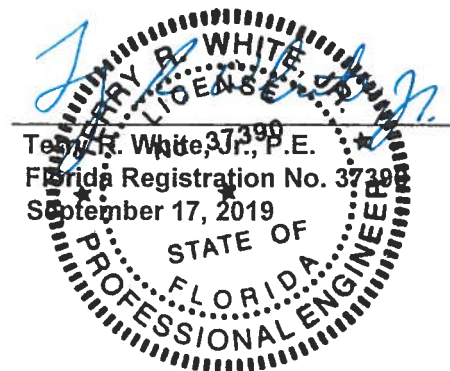
Community Panel: 12023C0466C

Width of Flood Plain: 460 LF

Area of Proposed Obstruction:  $63' \times (33' - ((31.5' + 26.5')/2)) = 252 \text{ SF}$

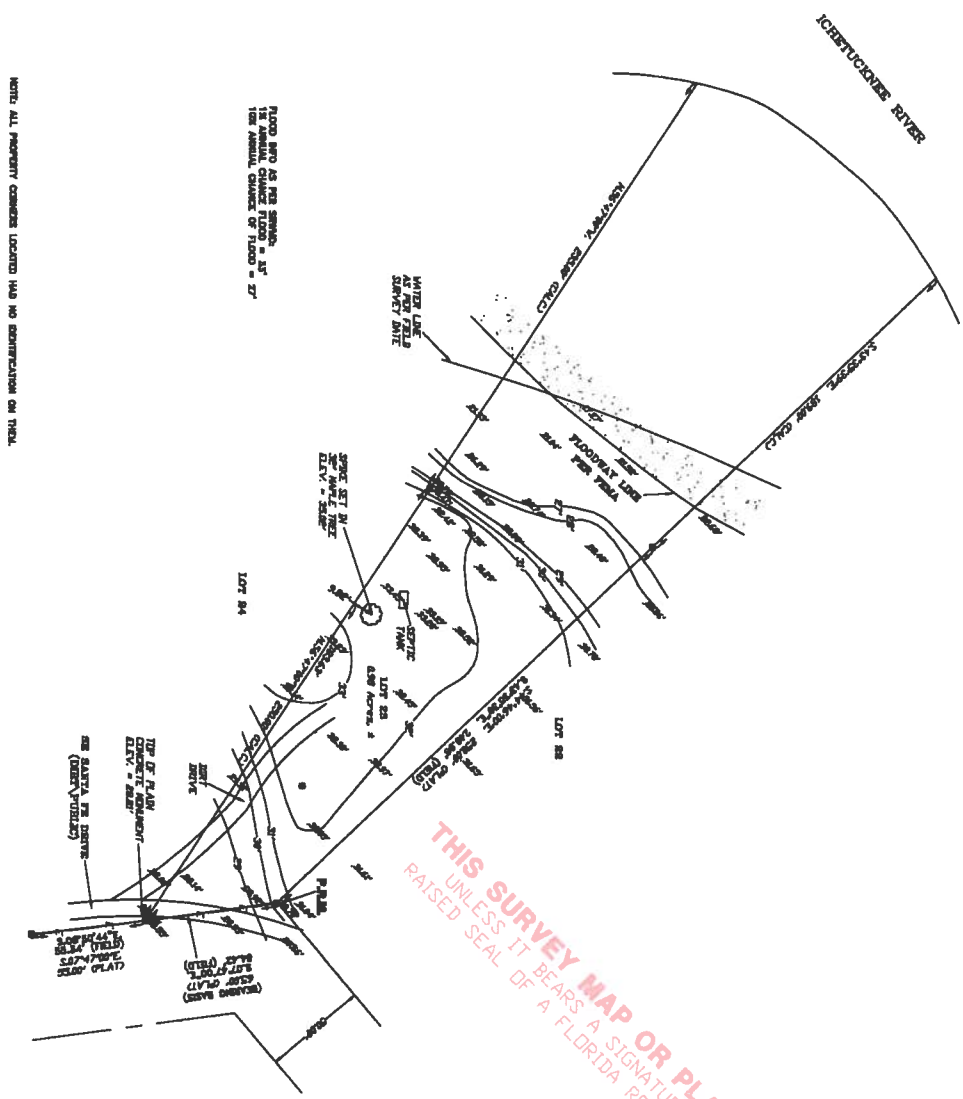
100-Year Storm Flood Elevation Increase:  $252/460 \text{ ft.} = 0.55 \text{ ft.}$

I hereby certify that construction of the proposed structure listed above will increase the 100-Year flood elevation less than 1 ft. Ground elevations were obtained from a Topographic Survey by Britt Surveying & Mapping, LLC. Building dimensions were supplied by the Sammy Keen the contractor. The 100-Year floodplain width was obtained from the Suwannee River Water District Flood Report.





THIS SURVEY MAP OR PLAT IS NOT VALID  
UNLESS IT BEARS A SIGNATURE AND THE ORIGINAL  
RAISED SEAL OF A FLORIDA REGISTERED LAND SURVEYOR

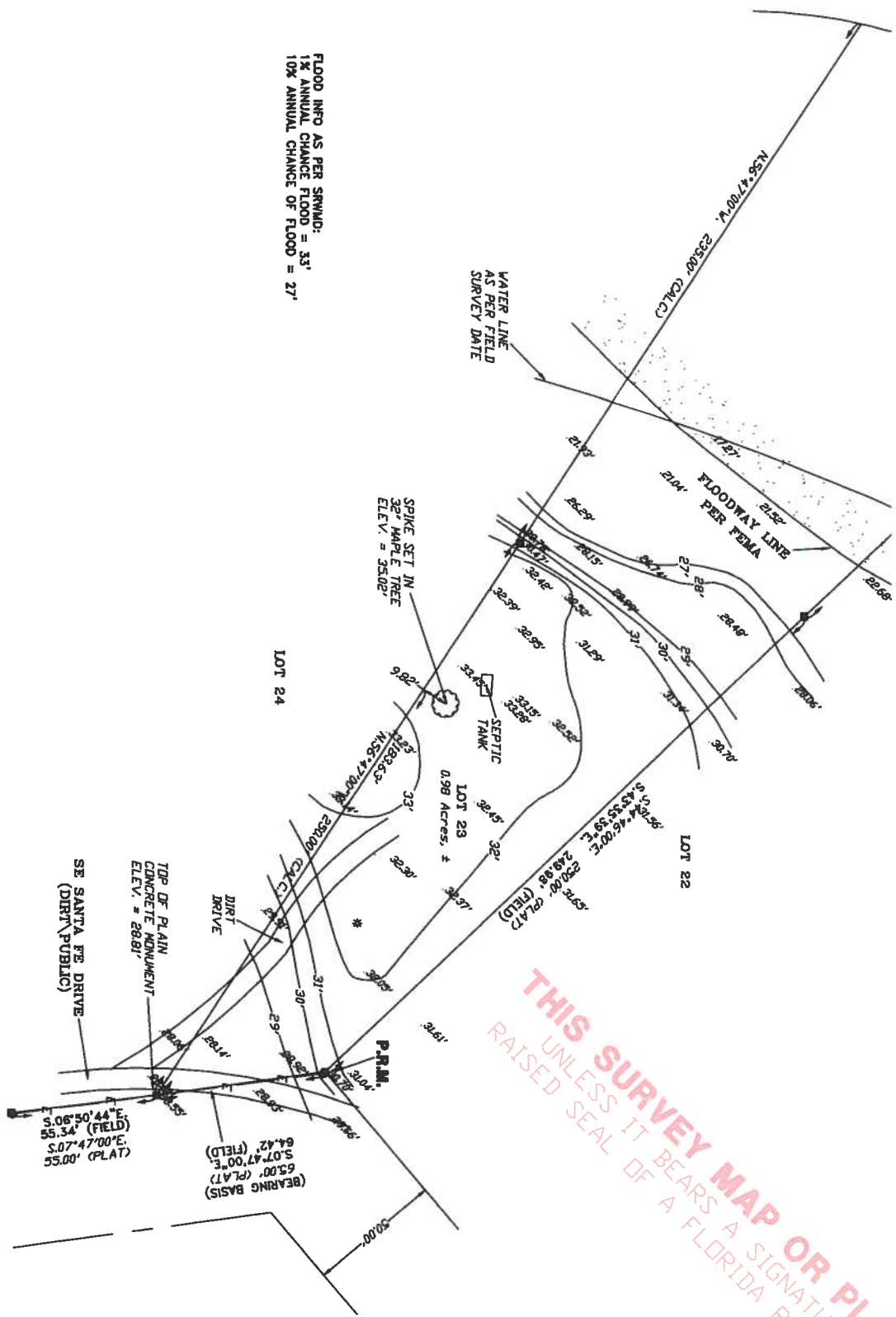


FLOOD RPTO AS PER SERVNO:  
1X ANNUAL CHANCE FLOOD = 25'  
10X ANNUAL CHANCE OF FLOOD = 27'

FIELD BOOK: 342 PAGE(S): 63

### SURVEYING CONTINUED FROM

[illegible]



FLOOD INFO AS PER SPWMD:  
 1% ANNUAL CHANCE FLOOD = 33'  
 10% ANNUAL CHANCE OF FLOOD = 27'

NOTE: ALL PROPERTY CORNERS LOCATED HAD NO IDENTIFICATION ON THEM.

CERTIFIED TO:

R. A. FEAGLE ALVA RONALD A. FEAGLE  
 DOROTHY D. FEAGLE  
 FEAGLE & KRISTIN SCHOKAR  
 MAY & KRISTIN SCHOKAR  
 FEAGLE & FEAGLE ATTORNEYS P.A.  
 OLD REPUBLIC NATIONAL TITLE INSURANCE COMPANY  
 THOMAS COUNTY FEDERAL SAVINGS AND LOAN ASSOCIATION

FIELD BOOK 342 PAGE(S) 23

SURVEYOR'S CERTIFICATION

I HEREBY CERTIFY THAT THIS SURVEY WAS MADE UNDER MY RESPONSIBLE CHARGE AND MEETS THE MINIMUM TECHNICAL STANDARDS AS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL SURVEYORS AND MAPPERS IN CHAPTER 32-17, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO SECTION 472.027, FLORIDA STATUTES.

06/05/14 FIELD SURVEY DATE  
 06/20/14 DRAWING DATE

L. SCOTT BRITT, P.S.M.  
 CERTIFICATION # 5757

NOTE: UNLESS IT BEARS THE SIGNATURE AND THE ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER THIS DRAWING, SKETCH, PLAT OR MAP IS FOR INFORMATIONAL PURPOSES ONLY AND IS NOT VALID.

## COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787

PHONE: (386) 758-1125 \* FAX: (386) 758-1365 \* Email: ron\_croft@columbiacountyfla.com

### Addressing Maintenance

To maintain the Countywide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for assigning and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Service Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County.

DATE REQUESTED: 12/1/2014 DATE ISSUED: 12/4/2014

#### ENHANCED 9-1-1 ADDRESS:

2912 SW SANTA FE DR  
FORT WHITE FL 32038

#### PROPERTY APPRAISER PARCEL NUMBER:

00-00-00-00644-000

#### Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCEL.

Address Issued By: SIGNED: / RONAL N. CROFT  
Columbia County 9-1-1 Addressing / GIS Department

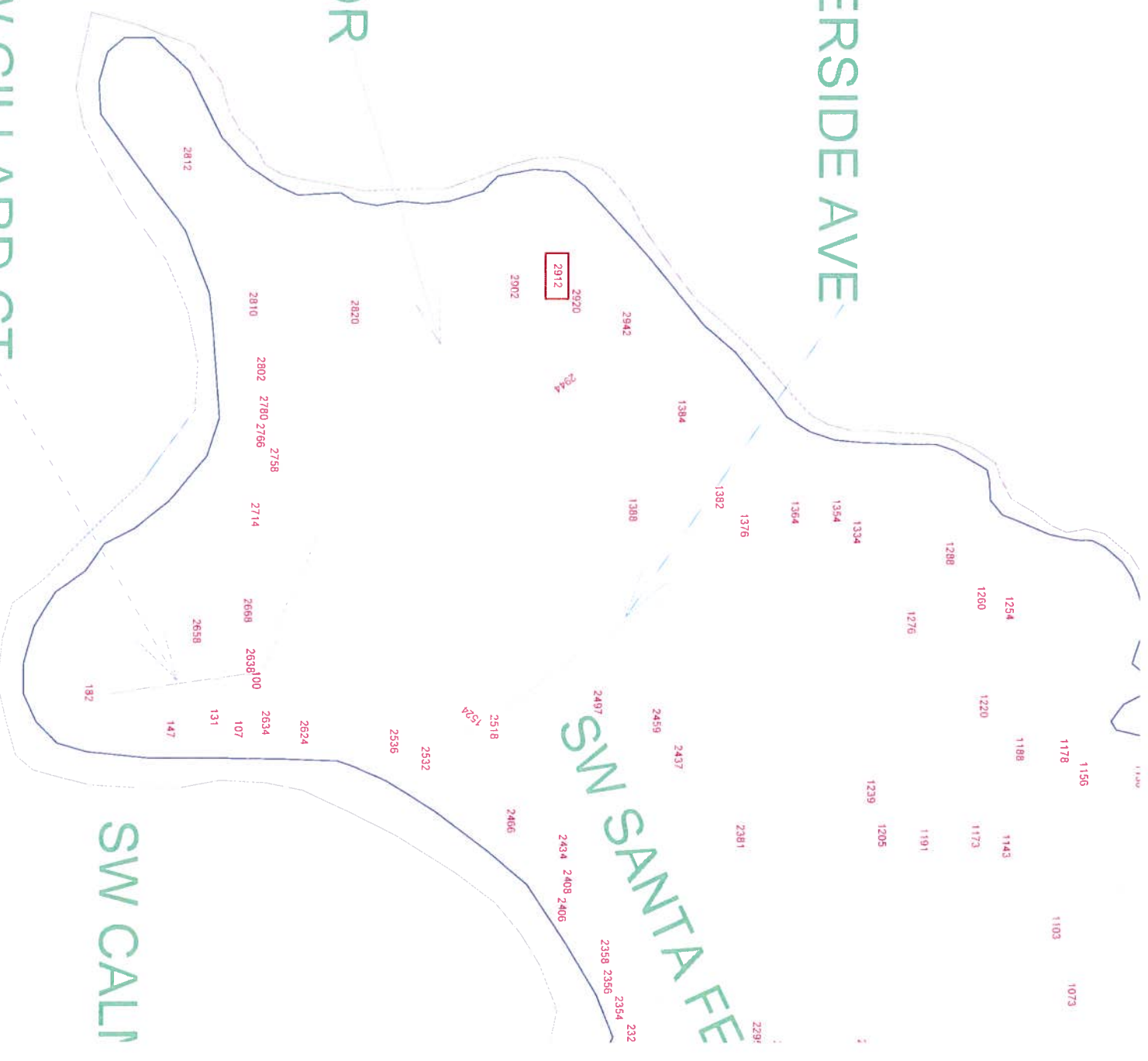
**NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION  
INFORMATION RECEIVED FROM THE REQUESTER. SHOULD,  
AT A LATER DATE, THE LOCATION INFORMATION BE FOUND  
TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.**

SW RIVERSIDE AVE

SW SANTA FE DR

SW GILLARD CT

SW CALI





## Legend

### Parcels

### 2018Aerials

### Addresses

### DevZones1

- ☐ others
- ☐ A-1
- ☐ A-2
- ☐ A-3
- ☐ CG
- ☐ CHI
- ☐ CI
- ☐ CN
- ☐ CSV
- ☐ ESA-2
- ☐ I
- ☐ ILW
- ☐ MUD-1
- ☐ PRD
- ☐ PRRD
- ☐ RMF-1
- ☐ RMF-2
- ☐ RO
- ☐ RR
- ☐ RSF-1
- ☐ RSF-2
- ☐ RSF-3
- ☐ RSF/MH-1
- ☐ RSF/MH-2
- ☐ RSF/MH-3
- ☐ DEFAULT

# Columbia County, FLA - Building & Zoning Property Map

Printed: Tue Oct 22 2019 13:03:45 GMT-0400 (Eastern Daylight Time)



## Parcel Information

Parcel No: 00-00-00-00644-000

Owner: SHOKAT MAXIMILIAN S & KRISTI

Subdivision: THREE RIVERS ESTATES UNIT 7

Lot: 23

Acres: 0.980930269

Deed Acres:

District: District 2 Rocky Ford

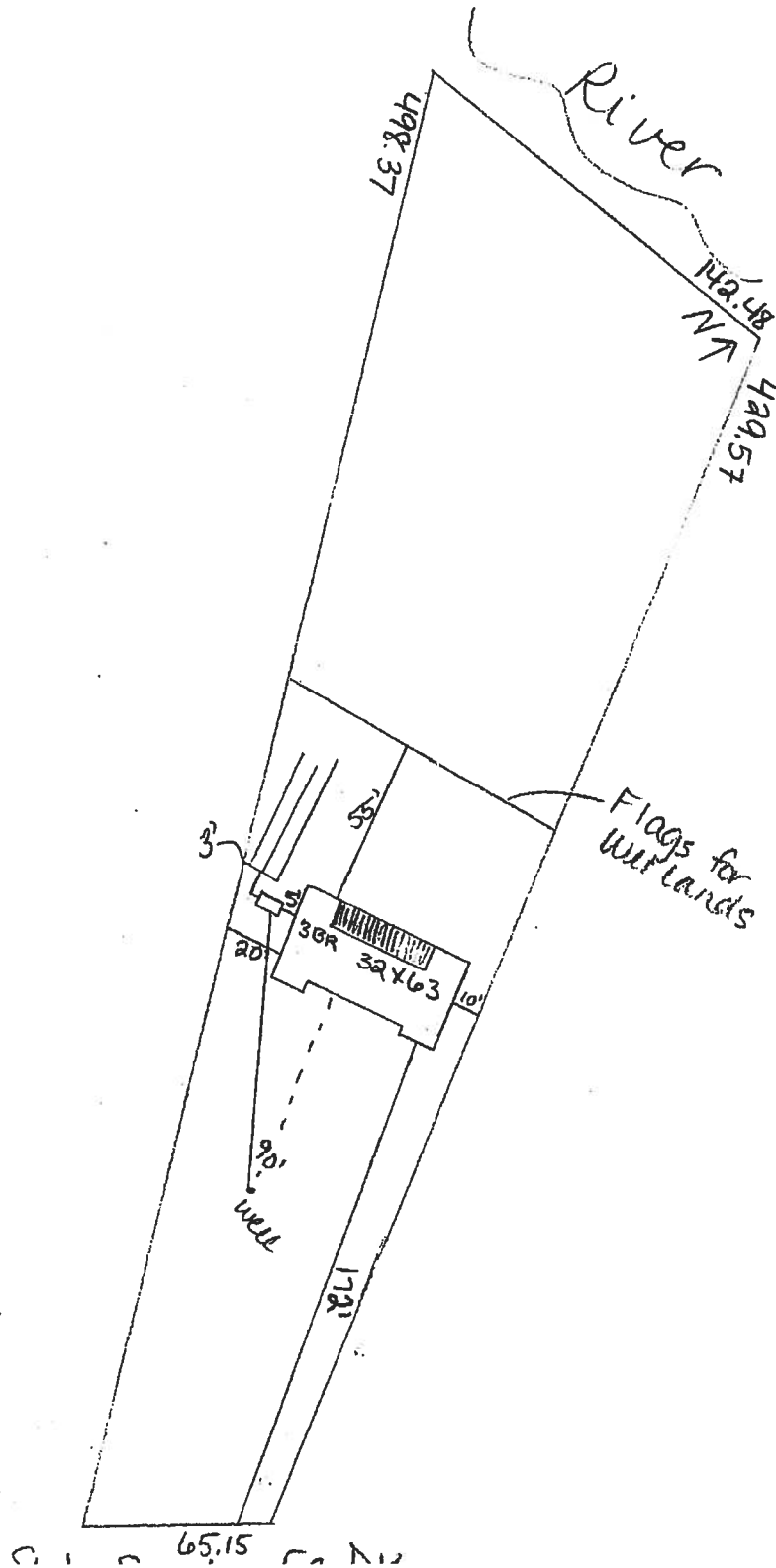
Future Land Uses: Environmentally Sensitive Areas -1

Flood Zones: AE

Official Zoning Atlas: ESA-2

All data, information, and maps are provided "as is" without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implied warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.

19-0810



Shokey  
1 inch = 100 feet  
10-30-19  
Shokey ID 7

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

19-0810

Shokat

----- PART II - SITEPLAN -----

Scale: 1 inch = ~~40~~ feet.

60

See  
attached

Notes: \_\_\_\_\_

Site Plan submitted by: \_\_\_\_\_

MASTER CONTRACTOR

Plan Approved \_\_\_\_\_

Not Approved \_\_\_\_\_

Date 10-30-19

By \_\_\_\_\_

ESI

Columbia

County Health Department

11/6/19

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
ONSITE SEWAGE TREATMENT AND DISPOSAL  
SYSTEM  
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 19-0810  
DATE PAID: \_\_\_\_\_  
FEE PAID: \_\_\_\_\_  
RECEIPT #: \_\_\_\_\_

## APPLICATION FOR:

[ ] New System [X] Existing System [ ] Holding Tank [ ] Innovative  
[ ] Repair [ ] Abandonment [ ] Temporary [ ] \_\_\_\_\_

APPLICANT: Maximilian and Kristin ShokatAGENT: ROCKY FORD, A & B CONSTRUCTIONTELEPHONE: 386-497-2311MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038

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TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

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## PROPERTY INFORMATION

LOT: 23 BLOCK: U7 SUB: Three Rivers Estates PLATTED: \_\_\_\_\_PROPERTY ID #: 00-00-00-00644-000 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: [ Y / N ]PROPERTY SIZE: 0.98 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ] <=2000GPD [ ] >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / N ] DISTANCE TO SEWER: NA FTPROPERTY ADDRESS: 2910 SW Santa Fe, Fort White, Fl

DIRECTIONS TO PROPERTY: Head W on NE Franklin St. toward NE  
Calhoun Ave, Take FL-247S and Sand Hill Rd to SW  
Riverside Ave, take Washington Blvd to Santa Fe Rd.

## BUILDING INFORMATION

[X] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	SF Residential	3	32x63 (2016 sq ft)	
2				
3				

[ ] Floor/Equipment Drains [ ] Other (Specify) \_\_\_\_\_

SIGNATURE: Rocky D. Ford DATE: 10/30/2019