

DATE 03/11/2005

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022899

APPLICANT MICHELE WILLINGHAM PHONE 386.497.1722
ADDRESS RT. 2, BOX 407 LAKE BUTLER FL 32054
OWNER MICHELE WILLINGHAM PHONE 386.496.1722
ADDRESS 179 SW LEONARD TERRACE LAKE CITY FL 32024
CONTRACTOR MICHELE WILLINGHAM PHONE 386.496.1722
LOCATION OF PROPERTY 90-W TO PINEMOUNT RD, TL GO TO BARWICK, TL GO TO PARKER
T AND IT'S THE 3RD PROPERTY ON L.(BLUE ROOF ON SFD)
TYPE DEVELOPMENT ATTACHED SHOP ESTIMATED COST OF CONSTRUCTION 34000.00
HEATED FLOOR AREA 680.00 TOTAL AREA 680.00 HEIGHT 13.00 STORIES 1
FOUNDATION CONC WALLS FRAMED ROOF PITCH 4'12 FLOOR CONC
LAND USE & ZONING A-3 MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 08-4S-16-02815-004 SUBDIVISION BARWICK
LOT 3 BLOCK PHASE UNIT TOTAL ACRES 1.41

Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 05-0176-E BLK N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: NOC ON FILE
1 FOOT ABOVE ROAD.

Check # or Cash 604

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 \$ 170.00 CERTIFICATION FEE \$ 3.40 SURCHARGE FEE \$ 3.40
MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$
FLOOD ZONE DEVELOPMENT FEE \$ CULVERT FEE \$ TOTAL FEE 226.80
INSPECTORS OFFICE CLERKS 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. 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."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVENIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

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

For Office Use Only Application # 0502-51 Date Received 2-18-05 By LH Permit # 22899
Application Approved by - Zoning Official BLK Date 03.03.05 Plans Examiner JTH ok Date 2-21-05
Flood Zone X Development Permit NIA Zoning A-3 Land Use Plan Map Category A-3
Comments
Reference 21418 House Permit - Turned in to Health Dept.

Applicants Name Michelle L Willingham / Forrest Williams Phone 386-496-1722 ^{719-7098*}
Address Rt 2 Box 407 Lake Butler FL 32054
Owners Name Michelle L Willingham Phone 386-496-1722
911 Address 179 SW Leonard Ter. Lake City, FL
Contractors Name owner Phone _____
Address _____
Fee Simple Owner Name & Address _____
Bonding Co. Name & Address _____
Architect/Engineer Name & Address Freeman Design Grp 161 NW Madison St Suite 102 Lake City
Mortgage Lenders Name & Address _____
Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Energy
Property ID Number 08-43-16-02815-004 Estimated Cost of Construction \$10,000
Subdivision Name Barwick Subdivision Lot 3 Block _____ Unit _____ Phase _____
Driving Directions 90-W TO PINE MOUNT RD, TL GO TO BARWICK, TL GO TO
PINEY TR, 3rd PROPERT IN L (BLUE ROOF ON EXISTING SFD.)
Type of Construction Shop Attached Number of Existing Dwellings on Property 1
Total Acreage 1.41 Lot Size _____ Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
Actual Distance of Structure from Property Lines - Front 250 Side 34' 6" Side 5 Rear 58' 6"
Total Building Height 13' Number of Stories 1 Heated Floor Area 678 Roof Pitch 4:12

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.

OWNERS AFFIDAVIT: 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.

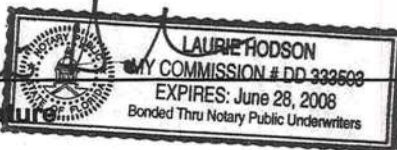
WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Michelle L Willingham
Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me
this 18 day of February 20 05.
Personally known ✓ or Produced Identification _____

Contractor Signature _____
Contractors License Number _____
Competency Card Number _____
NOTARY STAMP/SEAL

Laurie Hodson
Notary Signature


NOTICE OF COMMENCEMENT FORM
COLUMBIA COUNTY, FLORIDA

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

Tax Parcel ID Number 08-48-16-02815-004

1. Description of property: (legal description of the property and street address or 911 address)

Barwick Subdivision
Lot 3 Sect. 4 Range 16

2. General description of improvement: Workshop

3. Owner Name & Address Michelle L. Willingham Rt 2 Box 407

Interest in Property _____

4. Name & Address of Fee Simple Owner (if other than owner):

Lake Butler FL 32054

5. Contractor Name owner-Michèle Willingham Phone Number 386-496-1722

Address Rt 2 Box 407 Lake Butler FL 32054

6. Surety Holders Name _____

Address _____

Amount of Bond _____

Inst:2005003817 Date:02/18/2005 Time:14:19

DC,P.DeWitt Cason,Columbia County B:1038 P:1034

7. Lender Name _____

Address _____

8. Persons within the State of Florida designated by the Owner upon whom notices or other documents may be served as provided by section 718.13 (1)(a) 7; Florida Statutes:

Name _____

Phone Number _____

Address _____

9. In addition to himself/herself the owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) - (a) 7. Phone Number of the designee _____

10. Expiration date of the Notice of Commencement (the expiration date is 1 (one) year from the date of recording, (Unless a different date is specified) _____

NOTICE AS PER CHAPTER 713, Florida Statutes:

The owner must sign the notice of commencement and no one else may be permitted to sign in his/her stead.

Michelle L. Willingham
Signature of Owner

Sworn to (or affirmed) and subscribed before
day of 2-18, 20 05

NOTARY STATE



Laurie Hodson
Signature of Notary



05-02-51

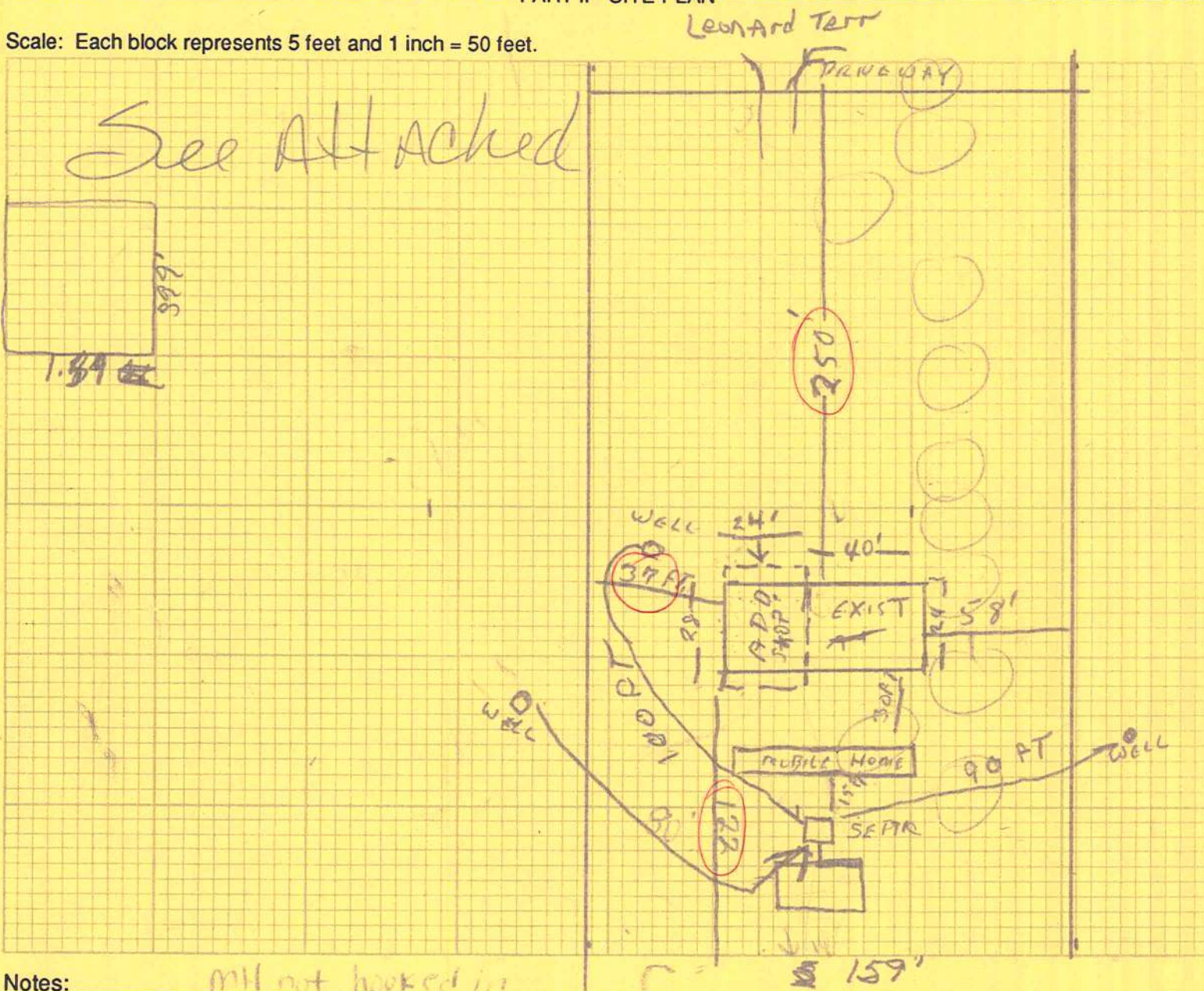
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 05-0176E

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: will not hooked in
at inspection on
2-22-04

Site Plan submitted by: Michael L. Willingham Signature

Plan Approved X Not Approved _____ Date 2-22-05

By Sally Gaddy - ESI (Columbian) County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DISCLOSURE STATEMENT

FOR OWNER/BUILDER WHEN ACTING AS THEIR OWN CONTRACTOR AND CLAIMING EXEMPTION OF CONTRACTOR LICENSING REQUIREMENTS IN ACCORDANCE WITH FLORIDA STATUTES, ss. 489.103(7).

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$25,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. You may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

TYPE OF CONSTRUCTION

- ☐ Single Family Dwelling
☐ Farm Outbuilding
☐ New Construction

- ☐ Two-Family Residence
☐ Other _____

☒ Addition, Alteration, Modification or other Improvement

NEW CONSTRUCTION OR IMPROVEMENT

I, Michele Willingham, have been advised of the above disclosure statement for exemption from contractor licensing as an owner/builder. I agree to comply with all requirements provided for in Florida Statutes ss.489.103(7) allowing this exception for the construction permitted by Columbia County Building Permit Number _____

*Michele L Willingham
Signature

Date _____

FOR BUILDING USE ONLY

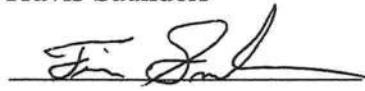
I hereby certify that the above listed owner/builder has been notified of the disclosure statement in Florida Statutes ss 489.103(7).

Date 2-18-05 Building Official/Representative Laurie Holt

22900 Reconnection

I Travis Saunders agree to let Randy Saunders handle any and all receiving of permits as needed for Clay Electric to turn my power on to my property.

Travis Saunders

A handwritten signature in black ink, appearing to read "Travis Saunders", written over a horizontal line.

Mar.10,2005

First American Title Insurance Company

14-55-16
Parcel ID - 03615-001

Schedule A (Continued)

Issuing Office File No.: 2004-786

BEGIN AT THE NORTHEAST CORNER OF THE NORTHWEST 1/4 OF SOUTHEAST 1/4, SECTION 14, TOWNSHIP 5 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND RUN THENCE SOUTH 00 DEG. 20 MIN. 57 SEC. EAST ALONG THE EAST LINE OF SAID NORTHWEST 1/4 OF SOUTHEAST 1/4, 1327.13 FEET TO THE SOUTHEAST CORNER THEREOF; THENCE SOUTH 88 DEG. 24 MIN. 30 SEC. WEST ALONG THE SOUTH LINE OF SAID NORTHWEST 1/4 OF SOUTHEAST 1/4 1323.35 FEET TO THE SOUTHWEST CORNER THEREOF; THENCE NORTH 00 DEG. 19 MIN. 13 SEC. WEST ALONG THE WEST LINE OF SAID NORTHWEST 1/4 OF SOUTHEAST 1/4 660.00 FEET; THENCE NORTH 88 DEG. 24 MIN. 30 SEC. EAST 849.30 FEET; THENCE NORTH 00 DEG. 19 MIN. 13 SEC. WEST 666.52 FEET TO THE NORTH LINE OF SAID NORTHWEST 1/4 OF SOUTHEAST 1/4; THENCE NORTH 88 DEG. 19 MIN. 54 SEC. EAST ALONG SAID NORTH LINE 473.43 FEET TO THE POINT OF BEGINNING. LESS AND EXCEPT THE SOUTH 25 FEET THEREOF AND THE WEST 50 FEET OF THE SOUTH 660 FEET THEREOF FOR CATES ROAD, A COUNTY MAINTAINED GRADED ROAD.

LESS AND EXCEPT:

COMMENCE AT THE NORTHEAST CORNER OF THE NORTHWEST 1/4 OF THE SOUTHEAST 1/4, SECTION 14, TOWNSHIP 5 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, FOR A POINT OF BEGINNING, AND RUN THENCE SOUTH 00 DEG. 20 MIN. 57 SEC. EAST, ALONG THE EAST LINE OF THE NORTHWEST 1/4 OF THE SOUTHEAST 1/4 OF SAID SECTION 14, 1301.62 FEET TO THE NORTHERLY MAINTAINED RIGHT OF WAY LINE OF SOUTHWEST BEAUFORD PLACE; THENCE SOUTH 88 DEG. 28 MIN. 41 SEC. WEST, ALONG THE SAID NORTHERLY RIGHT OF WAY LINE, 804.00 FEET; THENCE NORTH 00 DEG. 14 MIN. 18 SEC. WEST, 635.28 FEET; THENCE NORTH 88 DEG. 27 MIN. 33 SEC. EAST, 329.81 FEET; THENCE NORTH 00 DEG. 15 MIN. 11 SEC. WEST, 666.27 FEET TO THE INTERSECTION WITH THE NORTH LINE OF THE SOUTHEAST 1/4 OF SAID SECTION 14; THENCE NORTH 88 DEG. 28 MIN. 38 SEC. EAST, ALONG SAID NORTH LINE OF THE SOUTHEAST 1/4, 471.81 FEET TO THE POINT OF BEGINNING, BEING AND LYING IN THE NORTHWEST 1/4 OF SECTION 14, TOWNSHIP 5 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA.

755.0233

482 SW Beth Dr.
L.C. 32024

386 303-2259

COLUMBIA COUNTY OFFICE OF OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 08-4S-16-02815-004

Building permit No. 000022899

Use Classification ATTACHED SHOP

Fire: 0.00

Permit Holder MICHELE WILLINGHAM

Waste: 0.00

Owner of Building MICHELE WILLINGHAM

Total: 0.00

Location: 179 SW LEONARD TERR(BARWICK, LOT 3)

Date: 01/13/2006

Tanya Dieke

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)



No Guarantee

Notice of Treatment

Applicator Florida Pest Control & Chemical Co.

Address 536 SE BAY A DR.

City Lake City Phone (386) 7521703

Site Location Subdivision

Lot# Block# Permit# 00022899

Address 179 SW Leonard Terr.

AREAS TREATED

Area Treated	Date	Time	Gal.	Print Technician's Name
Main Body	3-14-05	5:45	88	RED Crawford

Patio/s #

Stoop/s #

Porch/s #

Brick Veneer

Extension Walls

A/C Pad

Walk/s #

Exterior of Foundation

Driveway Apron

Out Building

Tub Trap/s

(Other)

Name of Product Applied Dursban TC .8 %

Remarks

100 (P. 15) Notice of Treatment Guarantee

Applicator: **Florida Pest Control & Chemical Co. (www.flapest.com)**

Address: BAYVIEW

City: Lake City Phone: 752 1703

Site Location: Subdivision N/A

Lot # 8 Block # 2 Permit # 2

Address 179 SW Leonard Ter

Product used

☐ Premise ☐ Imidacloprid 0.1%

☒ Termidor ☐ Fipronil 0.12%

☐ Bora-Care ☐ Disodium Octaborate Tetrahydrate 23.0%

Type treatment:

☒ Soil

☐ Wood

Area Treated

Square feet

Linear feet

Gallons Applied

Perimeter

888

130

52

As per Florida Building Code 104.2.6 – If soil chemical barrier method for termite prevention is used, final exterior treatment shall be completed prior to final building approval.

If this notice is for the final exterior treatment, initial this line NDP.

1-13-06

1400

F254 James D. Baker

Date

Time

Print Technician's Name

Remarks:

Applicator - White

Permit File - Canary

Permit Holder - Pink

10/05 ©