	y Building Permit Year From the Date of Issue	PERMIT 000021577
APPLICANT EVETTE GIBBONS	PHONE 752.7160	000021577
ADDRESS 6560 NW LAKE JEFFERY ROAD	LAKE CITY	FL 3055
OWNER EVETTE GIBBONS	PHONE 752.7160	
ADDRESS 6560 NW LAKE JFFERY ROAD	LAKE CITY	FL 32055
CONTRACTOR OWNER BUILDER	PHONE 752.7160	_
LOCATION OF PROPERTY LAKE JEFFERY ROAD TO A	PPROX. 6 MILES ON THE LEFT.	
FACES C-250		
TYPE DEVELOPMENT SFD & UTILITY	ESTIMATED COST OF CONSTRUCTION	130050.00
HEATED FLOOR AREA 2601.00 TOTAL A	REA 3622.00 HEIGHT	14.00 STORIES 1
FOUNDATION CONC WALLS FRAMED	ROOF PITCH 5'12 F	FLOOR CONC
LAND USE & ZONING A-3	MAX. HEIGHT	35
Minimum Set Back Requirments: STREET-FRONT 30.1	00 REAR 25.00	SIDE 25.00
· —		20.00
NO. EX.D.U. FLOOD ZONE OUT	DEVELOPMENT PERMIT NO.	
PARCEL ID 09-3S-16-02049-136 SUBDIVIS	SION ROLLING OAKS	******
LOT 36 BLOCK PHASE UNIT	TOTAL ACRES	4.51
Culvert Permit No. Culvert Waiver Contractor's License N EXISTING 04-0136-N BLK Driveway Connection Septic Tank Number LU & Zo COMMENTS: NOC ON FILE	JDK	<u>N</u>
1 FOOT ABOVE ROAD.		
TTOOT ABOVE KOAD.		
TIOOT ABOVE ROAD.	Check # or C	Cash
	Check # or C	
FOR BUILDING & ZON	IING DEPARTMENT ONLY	Cash (footer/Slab)
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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 INCONVIENCE, 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.

Building Permit	Application Legal Lot of
Date 2-504 (911) 6560	NW LAKE RECORD Tettaly Red Tettaly Red
Applicants Name & Address EVETTE D. GIBBONS/	1697-4326-110N-5-1862 Phone 152. 7160
Owners Name & Address EVETH D. GIBBONS	7 ROAD LAKE (179 H 32055
Fee Simple Owners Name & Address	Phone
Contractors Name & Address SAME AS APPICANT	がい Phone
Legal Description of Property LOT 36 ROWN ONE	s sp
Location of Property AKE THE LUNG TO F Driving Directions (FIG.) 156 (C-7.50)	APMOX. C. MILES ON THE ILET
Tax Parcel Identification No. 09-35-16-02049-136	Estimated Cost of Construction \$ 90,000.
Type of Development SFO	Number of Existing Dwellings on Property
Comprehensive Plan Map Category A - 3	Zoning Map Category 4-3
Building Height Number of Stories _\ a Floor Area	Total Acreage in Development 4,5/2
Distance From Property Lines (Set Backs) Front 516' Side	81 /61 Rear 164 V Street
Flood Zone Certification Date	Development Permit WA
Bonding Company Name & Address ,	bevelopment Permit
Architect/Engineer Name & Address MARK DISOSWA 1 - 4	HE DITY, EL
Mortgage Landon None & Address TIMOL BIOGON 1	
Mortgage Lenders Name & Address COLUMBIA COUNTY	BANK 514 SW SR47, LAVE (19.4)
Application is hereby made to obtain a permit to do the work and installation commenced prior to the issuance of a permit and that all work will be perfor construction in this jurisdiction.	med to meet the standards of all laws regulating
OWNERS AFFIDAVIT: I hereby certify that all the foregoing inform with all applicable laws regulating construction and zoning.	ation is accurate and all work will be done in compliance
WARNING TO OWNER: YOUR FAILURE TO RECORD A RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS IF YOU INTEND TO OBTAIN FINANCING, CONSULT WE RECORDING YOUR NOTICE OF COMMENCEMENT.	S TO YOUR PROPERTY
Owner or Agent (including contractor) OWNEN/BUILDEN	Contractor
	Contractor License Number
¥	₩
STATE OF FLORIDA	STATE OF FLORIDA
COUNTY OF COLUMBIA	COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me	
this day of by	Sworn to (or affirmed) and subscribed before me
	this day of by
Personally Known OR Produced Identification	Personally Known OP Produced Identification

FORM 600B-01

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION Residential Component Prescriptive Method B

NORTH 1 2 3

Compliance with Method B Chapter 6 of the Florida Energy Efficiency Code may be demonstrated by the use of Form 600B for single and multifarmity residences of 3 stories or less in height, and additions to existing residential buildings. To comply, a building must meet or exceed all of the energy efficiency prescriptives in any one of the prescriptive component packages and comply with the prescriptive measures listed in Table 6B-1 of this form. An alternative method is provided for additions of 600 square feet or less by use of Form 600C. If a building does not comply with this method, it may still comply under other sections in Chapter 6 of the Code.

PROJECT NAME		BUILDER:		Na 35	
AND ADDRESS:	6560 NW Lake Softery	PERMITTI		CLIMATE	
	Lake City, 1-1a. 320551	OFFICE:	Columbia	ZONE: 1 2	3 6
OWNER:	//	PERMIT NO.	21577	JURISDICTION NO.:	
GENERAL DIRECTIONS					1000
1. New construction including ac	Iditions which incorporates any of the following features cannot comply usi	ing this method: ster	el stud walls single assembly cool/coiling o	Opptruction or studiets 1	
					cal roof glass.
o. citi in all the applicable space	s of the 10 be installed column on Table 6B-1 with the information regues	sted. All "To Be Inst:	alled" values must be equal to or more effic	tient than the required levels	
T. Complete page i based on il	e to be installed column information.			The state of the s	
Read, sign and date the "Pren	s for All Packages", Table 6B-2 and check each box to indicate your intent ared By" certification statement at the bottom of page 1. The owner or ow	to comply with all a	ipplicable items		
	The owner of own	ners agent must als	so sign and date the form.		
			Р	lease Print	CK /
1. Compliance	package chosen (A-F)		1. A		1
2. New constru	ction or addition		2. New	7	 '
3. Single family	detached or Multifamily attached		3. SF		- - /
	—No. of units covered by this submis	ecion			/
5. Is this a wor	st case? (yes (no)	331011	4	· ————	/
	floor area (sq. ft.)		5. <u>No</u>	/	
	eave overhang (ft.)		6. 260	<u> </u> -	
8. Glass type a			7	L.J.	-V
			Single Pane	Double Pane	
a. Clear	_			sq. ft. <u>293</u> sq. ft.	
	ilm or solar screen		8bs	sq. ftsq. ft.	-NA
	of glass to floor area		9. <u>9/3</u>	%	
	rea or perimeter, and insulation:			_	/
	on grade (R-value)		10a. R= 1		V
	, raised (R-value)		10b. R=	sq. ft.	
	, common (R-value)		10c. R=		
	rete, raised (R-value)		10d. R=	sq. ft.	
	ete, common (R-value)		10e. R=	sq. ft.	
11. Wall type, are	ea and insulation:			5q. it.	
a. Exteri	or: 1. Masonry (Insulation R-value)		11a-1 R=	sa fi	
	2. Wood frame (Insulation R-value)		11a-2 R= 13	sq. ft.	1-1/
b. Adjac	ent: 1. Masonry (Insulation R-value)		11b-1 R= /	sq. ft.	$\left -\frac{1}{1} \right $
	2. Wood frame (Insulation R-value)		11b-2 R=	2 <u>32</u> sq. ft.	
12. Ceiling type,	area and insulation:		1102 11-	sq. ft.	l
	attic (Insulation R-value)		12a. R= 30	$\frac{260}{\text{sg. ft.}}$	1/
	assembly (Insulation R-value)				
	on System: Duct insulation, location			sq. ft.	/
Test reno	rt (attach if required)		13. R= <u>6</u>	000/-	<u></u> /
4. Cooling syste			14a. Type:	(201/50/	<u>_/</u> /
,			14b. SEER/EER:	12	-V
(Types, centi	ral, room unit, package terminal A.C., gas, none)		14c. Capacity:	5 /on	_V/
5. Heating system			15a. Type: _#	Pat Pum	_ V
(Types: heat pump	o, elec. strip, nat. gas, L.P. gas, gas h.p., room or P	TAC, none)	15b. HSPF/COP/	AFUE: A	
			15c. Capacity: _	7.9	V,
Hot water sys			16a. Type:	Elector C	
(Types: elec., nat.	gas, L.P. gas, solar, heat rec., ded. heat pump, ot	her, none)	16b. EF:	7.0000	
I hereby certify that the plan	s and specifications covered by the calculation are in complianc	e with the	Review of plans and specifications cov	rered by this calculation indicates com	pliance with
rionda Energy Code	• • •	l t	the Florida Energy Code Before const for compliance in accordance with Sec	ruction is completed, this building will be	e inspected
PREPARED BY:	DATE:		The same of the same will Set	1011 000 500, F 3	f f

DATE.

DATE:

OWNER AGENT:



STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

	PART II - SITE PLAN	
Scale: Each block represents 5 feet and	1 inch = 50 feet.	and and the state of the state
	Hwy 250 have Beffe	7
	237 273 237 273 237 273 237 273	
Notes:	· · · · · · · · · · · · · · · · · · ·	
Site Plan submitted by:	Signature	Title
Plan Approved	Not Approved	Date
Ву		County Health Departme

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DISCLUSURE 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 th 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, buildin codes, and zoning regulations.

y .	F CONSTRUCTION
() Single Family Dwelling	() Two-Family Residence
() Farm Outbuilding	() Other
NEW CONSTRUC	CTION OR IMPROVEMENT
	Alteration, Modification or other Improvement
I <u>EVETTE</u> D. GIBBONS, have	e 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 Stati construction permitted by Columbia Coun	utes ss.489.103(7) allowing this exception for the
•	
Signature Signature	<u>12-05-03</u> Date
Signature	Date
FOR BU	ILDING USE ONLY
I hereby certify that the above listed owner	r/builder has been notified of the disclosure statemen

Building Official/Representative

in Florida Statutes ss 489.103(7).

Date / 2 05-03

Prepared by Elaine Davis, an employee of First American Title Insurance Company 300 North Marion Street Lake City, Florida 32055 (386) 752-3561

Inst:2003024236 Date:11/07/2003 Time:14:22

Doc Stamp-Deed: 175.00

DC,P. DeWitt Cason,Columbia County B:999 P:1340

Return to: Grantee

File No.: 1092-363723

WARRANTY DEED

Made this $\frac{\sqrt{03}}{\sqrt{03}}$, of 2003 by and between

Dr. Jorge M. Rivera and Maria M. Rivera, husband and wife

whose address is: **8876 Cypress Preserve Place**, **Fort Myers**, **FL 33912** hereinafter called the "grantor", to

Evette D. Gibbons, an unmarried person

whose post office address is: **4725 NW Lake Jeffrey Road**, **Lake City**, **FL 32055** hereinafter called the "grantee":

(Which terms "Grantor" and "Grantee" shall include singular or plural, corporation or Individual, and either sex, and shall include heirs, legal representatives, successors and assigns of the same)

Witnesseth, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in County. Florida, to-wit:

Lot 36 of ROLLING OAKS, according to the Plat thereof as recorded in Plat Book 5, Page(s) 132, of the Public Records of Columbia County, Florida.

Parcel Identification Number: R02049-136

Subject to all reservations, covenants, conditions, restrictions and easements of record and to all applicable zoning ordinances and/or restrictions imposed by governmental authorities, if any.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in any way appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized 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 31st of 2003.

onded thru (800)432-4254

Florida Notary Assn.

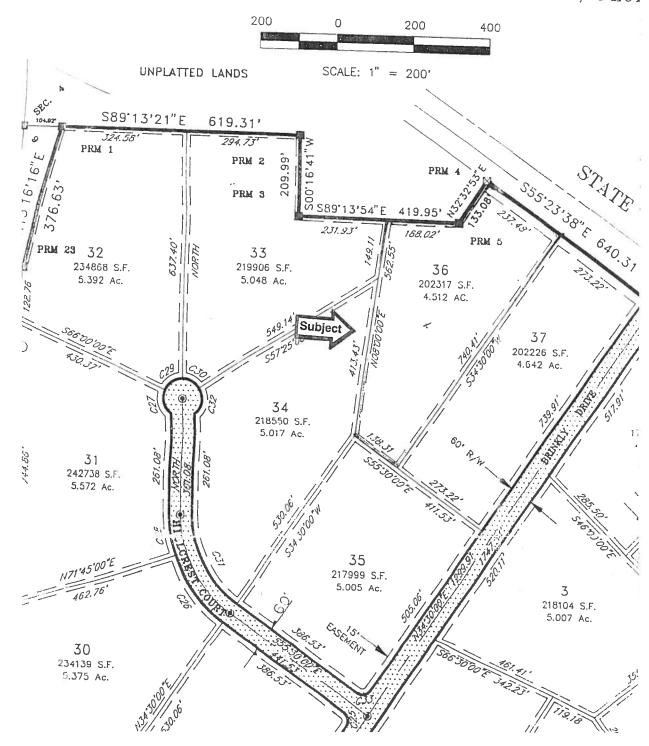
Inst:2003024236 Date:11/07/2003 Time:14:22 Doc Stamp-Deed : 175.00 _____DC,P.DeWitt Cason,Columbia County B:999 P:1341

Notary Print Name

My Commission Expires:

ROLLING OAI

THE NORTHWEST 1/4, THE NORTH 1/2 OF THE SOUTHWEST 1/4 OF THE NORTHEAST 1/4, AND THE /4 OF THE SOUTHEAST 1/4, OF SECTION 9, TOWNSHIP RANGE 16 EAST AND ALL LYING SOUTH OF STATE ROAD (LAKE JEFFERY HIGHWAY) COLUMBIA COUNTY, FLOI



Permit	No.	
	. 101	

Tax Parcel No. 09-35-16.02049-136

COLUMBIA COUNTY NOTICE OF COMMENCEMENT

STATE OF FLORIDA

COUNTY OF COLUMBIA

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.

1. Description of property: (legal description of the property, and street address if available.) - Lot 36 Rolling OAKS Sp	
6560 NW LAKE DEFFERY RO., LAKE CITY, FL 32055	
2. General description of improvement: Single Sauly DNEWS	
3. Owner Information:	
A. Name and address: EVETTE GIBBONS	
4725 NOW LAKE JEFFELLY ROAD, LAKE CITY. 41 37055	
B. Interest in property:	
C. Name and address of fee simple titleholder (if other than owner):	
4. Contractor: (name and address)	
5. Surety A. Name and address:	
B. Amount of bond:	
6. Lender: (name and address) COLUMBIA COUNTY BYNK 5/454 5047 LAKO (75, 413	20 25
7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 718.13 (1) (a) 7., Florida Statutes: (name and address)	

8.	In addition to himself, owner designates Columbia County Early
the Lie	nor's Notice as provided in Section 713.13 (1) (a) 7., Florida Statutes.
9.	Expiration date of notice of commencement (the expiration date is 1 year from the recording unless a different date is specified)
	(Signature of Owner)
5W 201	ORN TO and subscribed before me this 6th day of February Ale [Eddle]
	Notary Public
(NOTA	RIAL My Commission My Commission EXPIRES: June 26, 2004 Bonded Thru Notzry Public Underwriters
	Inst:2004002604 Date:02/06/2004 Time:08:58DC,P.DeWitt Cason,Columbia County B:1006 P:1150

CAM112M01 S CamaUSA Appra 12/05/2003 11:11 Legal Descrip Year T Property 2004 R 09-3S-16-02049-136 ROLLING OAKS GIBBONS EVETTE D	tion Maintenance Sel	Columbia County 22500 Land 001 AG 000 Bldg 000 Xfea 000 22500 TOTAL B
: : : F4=Show Available Codes F12:	=Cancel	4 6 8 10 12 14 16 18 20 22



STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 04-0/36N

	PART II - SITE PLAN	
Scale: Each block represents 5 feet and 1	inch = 50 feet.	
	1437 250 1442 50110	
	237 213	
	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Well to Massetic	
	881 273	
Notes: Mother Fig.	mwell to septic is	150 FEET.
Site Plan submitted by:	Te + Cluws	Title
Plan Approved	Not Approved	Date 2-4 3-4
Ву / / / /	(down	County Health Department

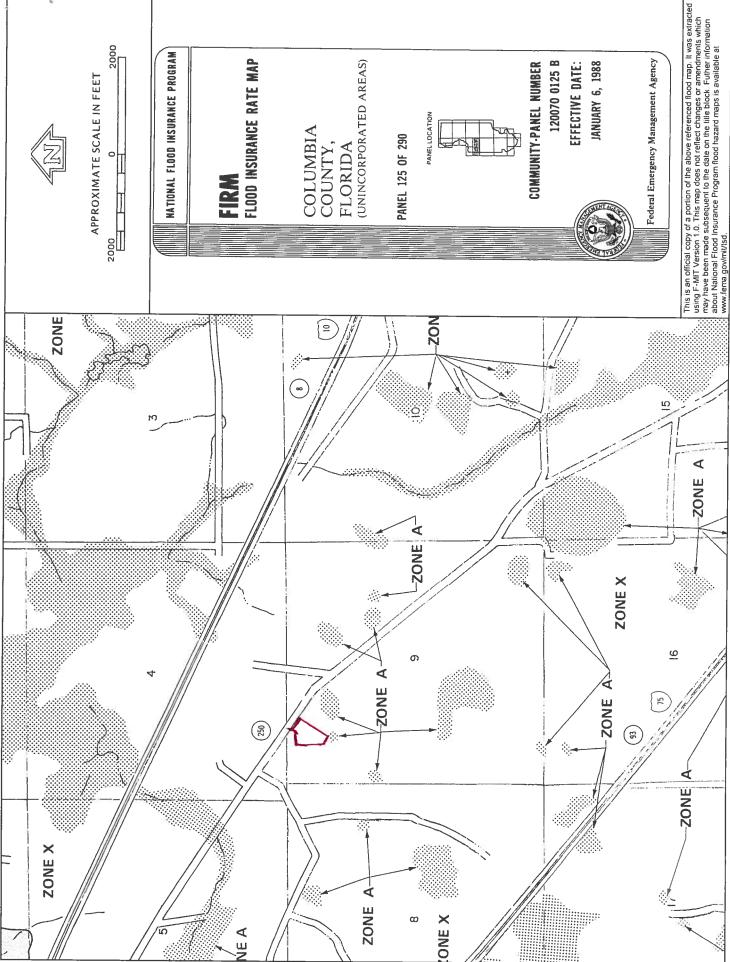
ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

LYNCH WELL DRILLING, INC.

RT. 6 BOX 464 LAKE CITY, FL 32025 PHONE (386) 752-6677 FAX (386) 752-1477

RESIDENTIAL WATER WELL BUILDING PERMIT INFORMATION

Building Permit #		Owners Nan	ne <u>Eve</u>	tte &	Moors
Well DepthFt.				Level	Ft.
Casing Size					(30)
Pump Installation: Subme	rsible Dee	p Well Jet		_Shallow V	Vell
Pump Make Rod Ch Ch	Pump Mod	el # 100 F 21	11.068	P _{Hp} /	
System Pressure (PSI)(PSI)	On.	30 on	50	Avg. Pres	ssura 50
Pumping System GPM at a	verage pressu	re and pumpi	ng level _	20	(GPM)
Tank Installation: Prechar	ged (Baldder)	Ato	nospheric	(Galvanize	ed)
Make Challenger	Model P	C244	Size	81	w
Tank Draw-down per cycle	at system pre	ssure	5.1		_Gallons
I HEREBY CERTIFY THA INSTALLED AS PER ABO			YSTEM I	HAS BEEN	i
Lynch Wall	Orlling	Lind a	u Ne	WCOM	Ь
				,	
260 9 License Number	16.464.4	Date Date	1109		



Print Date 2/17/04 (printed at scale and type A)



COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

accordance with the Columbia County Building Code. 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

Parcel Number 09-3S-16-02049-136 Building permit No. 000021577

Use Classification SFD & UTILITY Fire: 71.00

Permit Holder OWNER BUILDER

Owner of Building EVETTE GIBBONS

Waste: 147.00

Total: 218.00

Location: 6560 NW LAKE JEFFERY RD(ROLLING OAKS, LOT 36)

Date: 10/04/2005

Building Inspector

POST IN A CONSPICUOUS PLACE (Business Places Only)

	Notice of	f Treat	iment	
Applicator Florid	la Pest Contr	ol & Che	mical C	ю.
Address		and the second state of th	· 1.7.8	
City			Phone	
Site Location S	ubdivision		21	577
Lot# Block#			-	
A				
AREAS TREATED				
Area Treated	Date	Time	Gal.	Print Technician's Name
Main Body				
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 App Remarks				%

Applicator - White • Permit File - Canary • Permit Holder - Pink