

DATE 11/07/2003

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000021264

APPLICANT AARON SIMQUE PHONE 867-0692  
ADDRESS RT 9 BOX 785-33 LAKE CITY FL 32024  
OWNER ROBERT \* CAROL SHERIDAN PHONE 365-5040  
ADDRESS 267 NW SYLVI DRIVE LAKE CITY FL 32055  
CONTRACTOR AARON SIMQUE PHONE  
LOCATION OF PROPERTY HWY 90, TR ON BROWN RD, TL INTO STARLAKE, SITE ON RIGHT

TYPE DEVELOPMENT SFD/UTILITY ESTIMATED COST OF CONSTRUCTION 68940.00  
HEATED FLOOR AREA 2298.00 TOTAL AREA 2828.00 HEIGHT .00 STORIES 1  
FOUNDATION CONC WALLS FRAMED ROOF PITCH 8/12 FLOOR SLAB  
LAND USE & ZONING RSF-2 MAX. HEIGHT 23  
Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00  
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 28-3S-16-02372-073 SUBDIVISION STARLAKE  
LOT 23 BLOCK PHASE UNIT TOTAL ACRES .50

000000128 RB29003130  
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor  
PERMIT 03-0988-N BK RJ  
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident  
COMMENTS: ONE FOOT ABOVE THE ROAD, NOC ON FILE

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power Foundation Monolithic  
date/app. by date/app. by date/app. by  
Under slab rough-in plumbing slab framing  
date/app. by 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) Permanent power  
date/app. by date/app. by date/app. by  
C.O. Final Pool Reconnection  
date/app. by date/app. by date/app. by  
M/H tie downs, blocking, electricity and plumbing Utility Pole  
date/app. by date/app. by  
Pump pole M/H Pole Travel Trailer  
date/app. by date/app. by date/app. by  
Culvert Re-roof  
date/app. by date/app. by

BUILDING PERMIT FEE \$ 345.00 CERTIFICATION FEE \$ 14.14 SURCHARGE FEE \$ 14.14  
MISC. FEES \$ .00 ZONING CERT. FEE \$ 25.00 FIRE FEE \$ WASTE FEE \$  
FLOOD ZONE DEVELOPMENT FEE \$ CULVERT FEE \$ 5.00

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 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.

Columbia County  
Building Permit Application

21264/128

Date 11-06-03

Application No. \_\_\_\_\_

Applicants Name & Address AARON SIMQUE Rt 4 Box 785-33 Phone 867-0692  
LAKE CITY FL. 32024

Owners Name & Address Robert and Carol Sheridan Phone 365-5040

Fee Simple Owners Name & Address \_\_\_\_\_ Phone \_\_\_\_\_

Contractors Name & Address Same as Applicants Phone \_\_\_\_\_

Legal Description of Property Lot 23 Starlake Esg

Location of Property in Starlake Subdivision off of Brown Rd.  
Hwy 90 take Rt on Brown then take left into Starlake site on Rt.

Tax Parcel Identification No. 28-35-16-02372-073 Estimated Cost of Construction \$ 100,000.

Type of Development Residential - SFD Number of Existing Dwellings on Property 0

Comprehensive Plan Map Category RES Low Density Zoning Map Category RSF-2

Building Height 23' Number of Stories 2 Floor Area 2300 Total Acreage in Development 1/2 acre

Distance From Property Lines (Set Backs) Front 79' Side 26' Rear 92' Street 90

Flood Zone NO X per plat Certification Date \_\_\_\_\_ Development Permit N/A

Bonding Company Name & Address NONE

Architect/Engineer Name & Address Will Myers / Mark Disaway

Mortgage Lenders Name & Address owner paying cash

Application is hereby made to obtain a permit to do the 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 will 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 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.

  
Owner or Agent (including contractor)

Aaron Simque  
Contractor

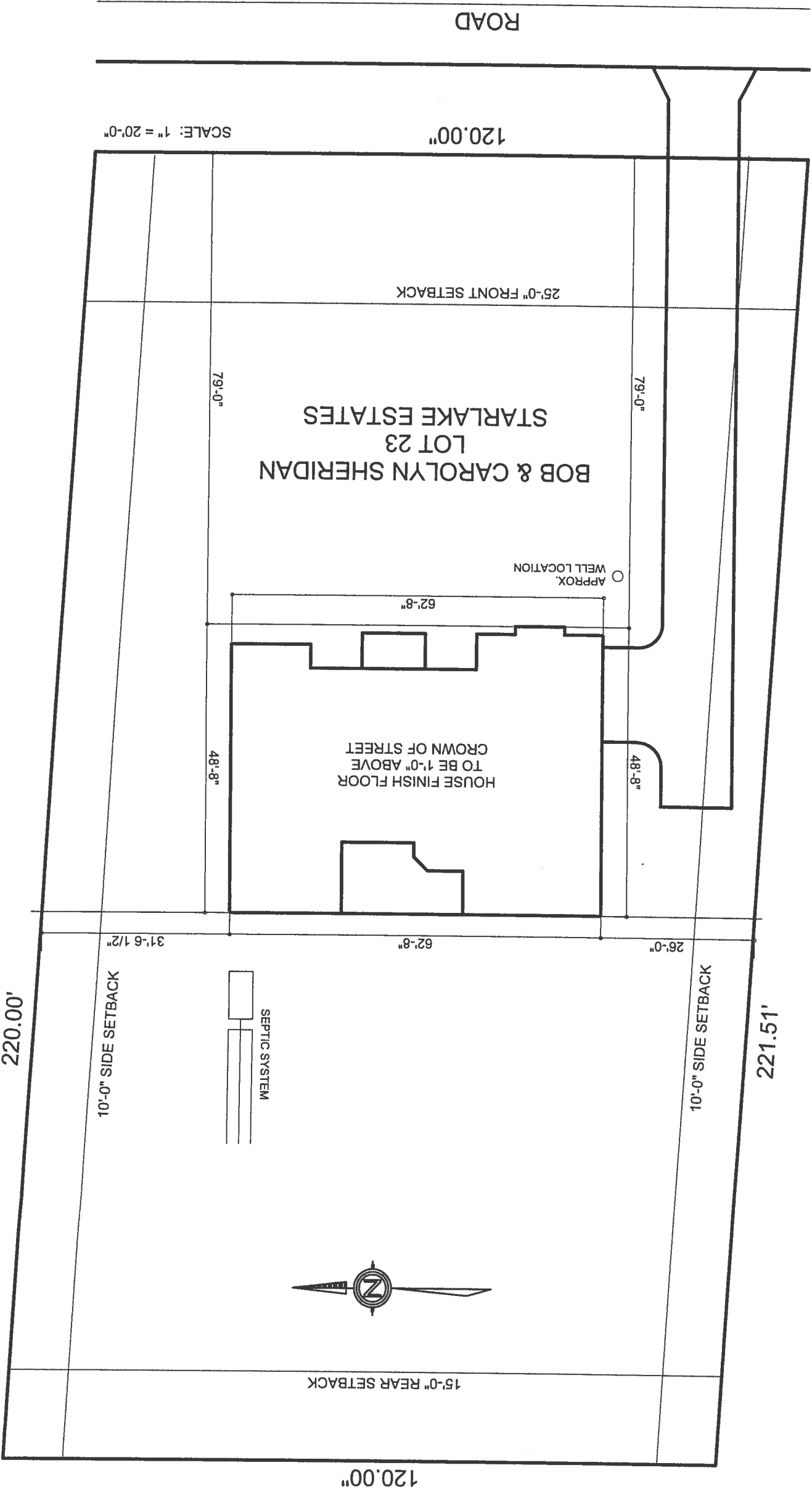
RB 29003130  
Contractor License Number

STATE OF FLORIDA  
COUNTY OF COLUMBIA  
Sworn to (or affirmed) and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_ by \_\_\_\_\_

Personally Known \_\_\_\_\_ OR Produced Identification

STATE OF FLORIDA  
COUNTY OF COLUMBIA  
Sworn to (or affirmed) and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_ by \_\_\_\_\_

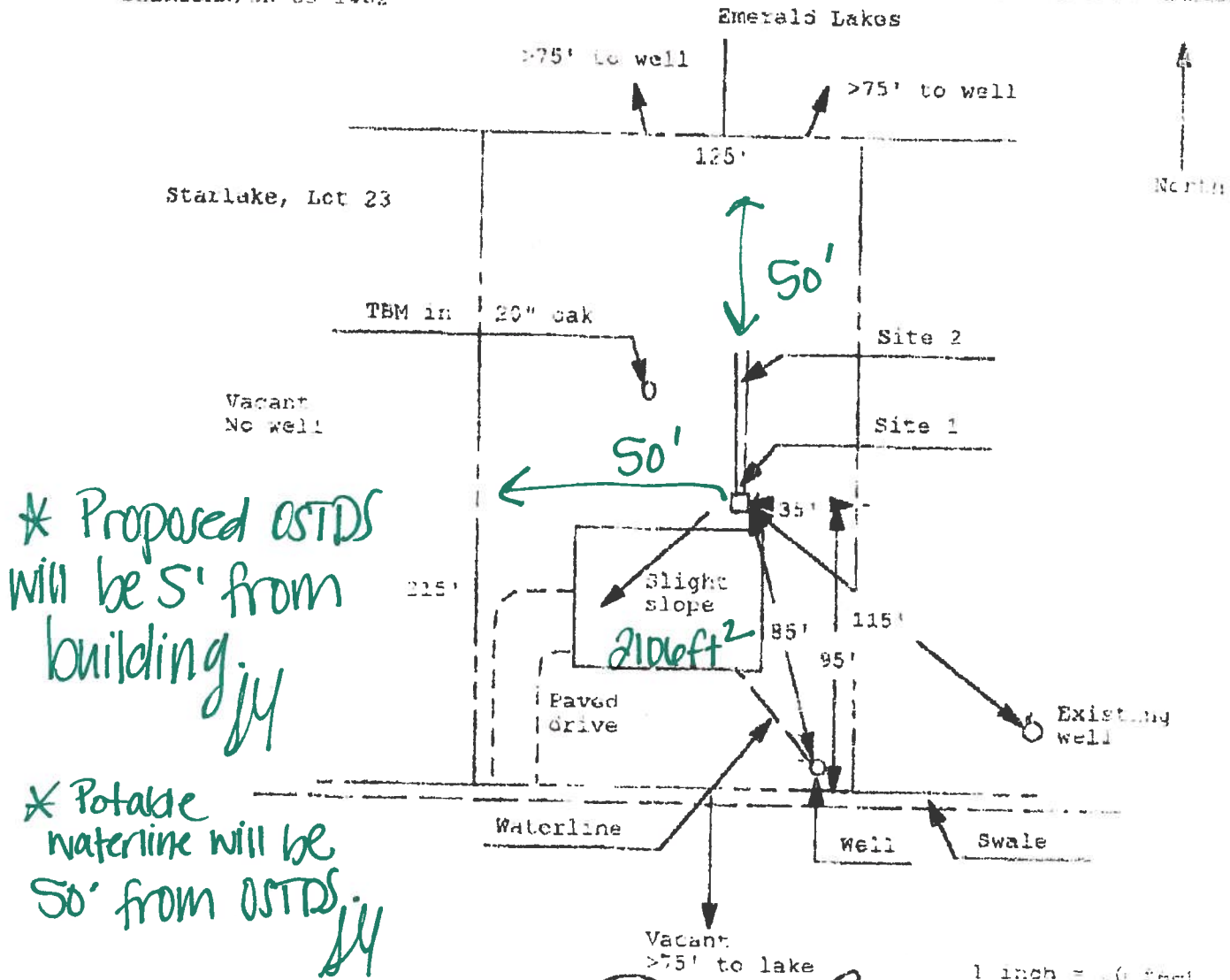
Personally Known \_\_\_\_\_ OR Produced Identification



**Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan**  
**Permit Application Number: 03-0988N**

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT**

SHERIDAN/CR 03-1462



Site Plan Submitted By Paul Lloyd Date 12/8/03  
 Plan Approved Not Approved Date 11/3/03  
 By Paul Lloyd Salhi Khaddy CPHU  
 Notes: ESI-COLUMBIA

**Columbia County Building Department  
Culvert Permit**

**Culvert Permit No.  
000000128**

DATE 11/07/2003 PARCEL ID # 15-4S-16-03023-110

APPLICANT AARON SIMQUE PHONE 867-0692

ADDRESS RT 9 BOX 785-33 LAKE CITY FL 32025

OWNER ROBERT & CAROL SHERIDAN PHONE 365-5040

ADDRESS 267 NW SYLVI DRIVE LAKE CITY FL 32024

CONTRACTOR AARON SIMQUE PHONE 867-0692

LOCATION OF PROPERTY HIGHWAY 90, TR ON BRON, TL INTO STARLAKE , SITE ON RIGHT

SUBDIVISION/LOT/BLOCK/PHASE/UNIT STARLAKE 23 1

SIGNATURE

**INSTALLATION REQUIREMENTS**

☒ X

Culvert size will be 18 inches in diameter with a total length of 32 feet, leaving 24 feet of driving surface. Both ends will be mitered 4 foot with a 4 : 1 slope and poured with a 4 inch thick reinforced concrete slab.

INSTALLATION NOTE: Turnouts will be required as follows:

- a) a majority of the current and existing driveway turnouts are paved, or;
- b) the driveway to be served will be paved or formed with concrete.

Turnouts shall be concrete or paved a minimum of 12 feet wide or the width of the concrete or paved driveway, whichever is greater. The width shall conform to the current and existing paved or concreted turnouts.

☐

Culvert installation shall conform to the approved site plan standards.

☐

Department of Transportation Permit installation approved standards.

☐

Other \_\_\_\_\_

ALL PROPER SAFETY REQUIREMENTS SHOULD BE FOLLOWED  
DURING THE INSTALLATION OF THE CULVERT.

135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160

Amount Paid 5.00



Permit No. \_\_\_\_\_

Tax Parcel No. \_\_\_\_\_

**COLUMBIA COUNTY NOTICE OF COMMENCEMENT**

Inst:2003023797 Date:11/04/2003 Time:10:26

**STATE OF FLORIDA**

XXX DC, P. DeWitt Cason, Columbia County B:998 P:2790

**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 23 STARLAKE ESTATES

2. General description of improvement: 2300 SF HOUSE / RESIDENCE

3. Owner Information:

A. Name and address:

Robert T. Sheridan and Carol L. Sheridan  
PO Box 340 Lake City, Florida 32056

B. Interest in property:

Owners are sole owners with no liens mortgages  
or any other encumbrances

C. Name and address of fee simple titleholder (if other than owner):

NONE

4. Contractor: (name and address)

AARON SIMQUE HOMES INC.  
RT 9 Box 785-33 LAKE CITY FL 32024

5. Surety

A. Name and address: N/A

B. Amount of bond:

N/A

6. Lender: (name and address) NONE

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)

N/A

8. In addition to himself, owner designates None  
of \_\_\_\_\_ to receive a copy of  
the Lienor's Notice as provided in Section 713.13 (1) (a) 7., Florida Statutes.

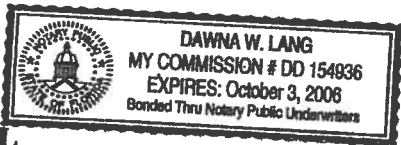
9. Expiration date of notice of commencement (the expiration date is 1 year from the  
date of recording unless a different date is specified) \_\_\_\_\_.

Robert T Sheridan

Carol L Sheridan

(Signature of Owner)

SWORN TO and subscribed before me this 4<sup>th</sup> day of November  
19 2003.



(NOTARIAL  
SEAL)

Dawna W. Lang  
Notary Public

My Commission Expires:

identification produced

FLDL S635-778-39-101-0 exp. 2007/3-21

FLDL S635-106-41-906-0 exp. 2007/11-6

Robert Thomas Sheridan

Carol Fetter Sheridan

Inst:2003023797 Date:11/04/2003 Time:10:26

YKK DC, P. DeWitt Cason, Columbia County B:998 P:2791