	Columbia County Bu This Permit Must Be Prominently Posted on		struction	PERMIT 000029094
APPLICANT AND	ELA LAWSON-SANTIAGO	PHONE	407.830.5327	
ADDRESS 109) KENSINGTON PARK DRIVE	ALTAMONTE SPRIN	GS	FL 32714
OWNER STA	CEY T. CERVANTES	PHONE	386.755.2976	
ADDRESS 129	SW INWOOD COURT	LAKE CITY		FL 32024
CONTRACTOR	E. MICHAEL HOLLAND	PHONE	407.830.5327	
LOCATION OF PRO	90-W TO C-341,TL GO TO CREEK	KSIDE S/D,TR TO CRE	EKSIDE LN,TR	
	TO INWOOD CT,TR AND IT'S TH	IE PLACE ON R.		
TYPE DEVELOPME	ENT SWIMMING POOL ESTI	MATED COST OF CO	NSTRUCTION	35000.00
HEATED FLOOR A	REA TOTAL AREA		HEIGHT	STORIES
FOUNDATION	WALLS RO	OOF PITCH	FLO	OOR
LAND USE & ZONI	NG RSF-2	MAX	. HEIGHT	
Minimum Set Back F	tequirments: STREET-FRONT 25.00	REAR	15.00	SIDE 10.00
NO. EX.D.U. 1	FLOOD ZONE I	DEVELOPMENT PERM	MIT NO.	
PARCEL ID 12-4	S-16-02939-147 SUBDIVISION	CREEKSIDE		
LOT 47 BLO	CK PHASE UNIT	TOTA	L ACRES0.6	8
Culvert Permit No. EXISTING Driveway Connection COMMENTS: ACC	CPC056809 Culvert Waiver Contractor's License Numb BLK Septic Tank Number LU & Zoning CESSORY USE TO EXISTING STRUCTURE.		Applicant/Owner/G	New Resident
			Check # or Ca	sh 54110
	FOR BUILDING & ZONING	G DEPARTMENT	ONLY	(footer/Slab)
Temporary Power	Foundation		ONLY Monolithic	
	date/app. by	G DEPARTMENT date/app. by	_ Monolithic	date/app. by
Temporary Power . Under slab rough-in p	date/app. by olumbing Slab	date/app. by	_ Monolithic	date/app. by
Under slab rough-in p	date/app. by blumbing Slab date/app. by		_ Monolithic	date/app. by
Under slab rough-in p	date/app. by olumbing Slab date/app. by Insulation	date/app. by	_ Monolithic	date/app. by
Under slab rough-in p Framing	foundation date/app. by olumbing date/app. by Insulation date/app. by date/app. by	date/app. by date/app. by app. by	_ Monolithic	date/app. by
Under slab rough-in p Framing	Foundation date/app. by blumbing Slab date/app. by Insulation ate/app. by date/app. by	date/app. by date/app. by app. by	Monolithic Sheathing/N	date/app. by
Under slab rough-in p Framing	foundation date/app. by plumbing date/app. by Insulation ate/app. by date/ bove slab and below wood floor date/ Peri. beam (Lintel)	date/app. by date/app. by app. by Ele/app. by	Monolithic Sheathing/N	date/app. by Nailing
Under slab rough-in p Framing	foundation date/app. by lumbing date/app. by Insulation ate/app. by date/ bove slab and below wood floor date/app. by Peri. beam (Lintel)	date/app. by date/app. by app. by Ele/app. by	Monolithic Sheathing/Nectrical rough-in Pool	date/app. by Nailing date/app. by
Under slab rough-in p Framing	Foundation date/app. by lumbing Slab date/app. by Insulation ate/app. by date/app. by Peri. beam (Lintel) date/app. by C.O. Final	date/app. by date/app. by app. by Ele/app. by	Monolithic Sheathing/N	date/app. by Nailing
Under slab rough-in p Framing	Foundation date/app. by lumbing Slab date/app. by Insulation ate/app. by date/ bove slab and below wood floor date/app. by C.O. Final date/app. by Utility Pole M/H tie dow	date/app. by date/app. by app. by te/app. by date/app. by	Monolithic Sheathing/Nectrical rough-in Pool Culvert	date/app. by Nailing date/app. by date/app. by date/app. by date/app. by
Under slab rough-in p Framing	Foundation date/app. by lumbing Slab date/app. by Insulation ate/app. by date/ bove slab and below wood floor date/app. by C.O. Final date/app. by Utility Pole M/H tie do	date/app. by date/app. by Eletapp. by date/app. by date/app. by te/app. by ste/app. by wns, blocking, electricity	Monolithic Sheathing/Nectrical rough-in Pool Culvert	date/app. by Nailing
Under slab rough-in p Framing	Foundation date/app. by lumbing date/app. by Insulation ate/app. by date/ bove slab and below wood floor date/app. by C.O. Final date/app. by Utility Pole Description M/H tie down	date/app. by date/app. by app. by El te/app. by date/app. by te/app. by	Monolithic Sheathing/Nectrical rough-in Pool Culvert y and plumbing y	date/app. by Nailing date/app. by date/app. by date/app. by date/app. by
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Under slab rough-in p Framing	Foundation date/app. by lumbing Slab date/app. by Insulation ate/app. by date/app. by Dove slab and below wood floor date/app. by C.O. Final date/app. by Utility Pole p. by date/app. by RV date/app. by	date/app. by date/app. by Elete/app. by date/app. by date/app. by ste/app. by date/app. by ste/app. by	Monolithic Sheathing/Nonectrical rough-in Pool Culvert y and plumbing Re-roof SURCHARGE	date/app. by Nailing date/app. by date/app. by date/app. by date/app. by date/app. by date/app. by
Under slab rough-in p Framing	Foundation date/app. by lumbing Slab date/app. by Insulation ate/app. by date/app. by C.O. Final date/app. by C.O. Final date/app. by Gate/app. by Adate/app. by C.O. Final date/app. by RV date/app. by RV date/app. by CERTIFICATION FEE 0.00 CONING CERT. FEE \$ 50.00	date/app. by date/app. by Ele/app. by date/app. by ste/app. by wns, blocking, electricity date/app. by \$ 0.00 FIRE FEE \$ 0.00	Monolithic Sheathing/Nonectrical rough-in Pool Culvert y and plumbing Re-roof SURCHARGE WASTI	date/app. by Nailing

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.

Columbia County Building Permit Application

For Office Use Only Application # 1012 - 32 Date Received 12/17/10 By UH Permit # 23094
Zoning Official Date 21.12.10 Flood Zone NA Land Use Zoning RSF-Z
FEMA Map #N/A_ ElevationN/A_ MFEN/A_ RiverN/A_ Plans Examiner7/A_ Date_12-2 = √ 0
Comments
NOC EH Deed or PA Site Plan State Road Info Parent Parcel #
Dev Permit # □ In Floodway □ Letter of Auth. from Contractor □ F W Comp. letter
School = TOTAL NA **** School School
Septic Permit No. <u>N/A</u> Septic Permit No. <u>N/A</u> Fax 407-830-6404
Name Authorized Person Signing Permit Angela Lawson Santiago Phone 407-830-5307
Address 1090 KENSIN Exton Park 2 COMORTS Sheif St
Owners Name STACEY TURNER CERVANTES Phone 386-755-2976
911 Address 129 SW INWOOD CT, L.C 32025
Contractors Name HOLLAND POOLS / E MICHAEL HOLLAND Phone 407-830-5327 EXT 112
Address 1090 KENSINGTON PARK DR, ALTAMONTE SPRINGS, FL 32714
Fee Smple Owner Name & Address
Bonding Co. Name & Address
Architect/Engineer Name & Address GORDON SHEPARDSON 672 N SEMORAN BLVD, ORLANDO, FL Mortgage Lenders Name & Address
Circle the correct power company - FL Power & Light - Clay Bec Suwannee Valley Bec Progress Energy
Property ID Number 12-4S-16-02939-147 Estimated Cost of Construction \$35,000.00
Subdivision Name_CREEKSIDE Lot 47_ Block Unit Phase
Driving Directions US 90, left on CR 341, right Creekside Ln, right SW Inwood Ct
Number of Existing Dwellings on Property/
Construction of in ground swimming pool Total Acreage .680 Lot Size
Do you need a - <u>Culvert Permit</u> or <u>Culvert Waiver</u> or <u>Have an Existing Drive</u> Total Building Height
Actual Distance of Structure from Property Lines - Front 30+ Side 15+ Side 49 Pear 39
Number of Stories Heated Floor Area Total Floor Area Poof Pitch
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.

spola to Holland Pols 12-21-00

Columbia County Building Permit Application

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.

<u>TIME LIMITATIONS OF PERMITS:</u> 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.

<u>WARNING TO OWNER:</u> YOUR FAILURE TO RECORD A NOTICE OF COMMENCMENT 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. It may be to your advantage to check and see if your property is encumbered by any restrictions.

×	Hacuschunk	(Owners must orgin All Applications before Permit issuance.)
		MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.
		erstand and agree that I have informed and provided this written responsibilities in Columbia County for obtaining permit time limitations.
	Contractor's Signature (Permitée)	Contractor's License Number CPC 056809 Columbia County Competency Card Number
	Affirmed under penalty of perjury to by the Contractor	and subscribed before me this $\frac{16}{10}$ day of December 20/0.
	Personally known or Produced Identification State of Florida Notary Signature (For the Contractor)	SEAL: STEPHANIE BAUMGARTNER

(Owners Must Sign All Applications Before Permit Issuance.)

COLUMBIA COUNTY BUILDING DEPARTMENT



135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

Office: 386-758-1008 Fax: 386-758-2160

SWIMMING POOL MINIMUM PLAN REQUIREMENTS AND CHECKLIST FOR FLORIDA BUILDING CODE 2007 with 2009 SUPPLEMENTS

REQUIREMENTS FOR SITE BUILT POOLS. (2 Sets of plans with engineering is required to be submitted for each permit.)

A	1.	Site-Plan showing the location of the pool and the distance from each property line, include structures and the distance from the pool.
	2	
P	2.	Reinforcement, thickness and type concrete, depth limits, details of built in steps,
	2	footings on decks, for both pools and hot tubs or whirlpools.
	3.	Piping detail for drains, suction inlet locations, skimmers and re-circulation lines.
		Entrapment protection device. (Manufacturer and Model)
	5.	Back-up vacuum relief device or means.
		 A. Approved vacuum release system. (Manufacturer and Model)
		 B. Approved vent piping.
		 C. Other approved devices or means.
	6.	Diameter and depths of proposed pool relative to adjacent foundations of other
		structures and any retaining walls and/or finished grades and slopes. If pool falls in
		the angle of repose of any existing foundation, additional engineering shall be
		provided indicating how the foundation shall be maintained.
	7.	Distance of any glass adjacent to the pool edge and distance from walking surface to
		bottom edge of glass. (As per FBC 2004 section 2405.2 any glass within 60" of the
		waters edge and within 60" of the walking surface on the pool side of the glazing shall
		be tempered.)
	8.	All accessories to the pool such as ladders, slides, diving boards etc. that are
		proposed.
	9.	Location of existing electrical outlets and fixtures and the proposed receptacle within
		the pool area.
	10	. Location and type of all proposed pool equipment, electric and gas service.
	11	. Will pool or spa have a heater and will it be gas or electric? (If gas provide layout
		and sizing of gas lines.)
	12	. Show detail of how POOL BARRIER REQUIREMENTS, FBC Section 424.2.17,
		shall be met on this specific pool.
	13	. NOTICE TO SWIMMING POOL OWNERS - Include this form signed by the
erenth.		owner and the contractor.
		A LIVER WITH MAY AND

REQUIRED INSPECTIONS:

<u>GROUND</u>: Set-backs from property lines, distance from existing foundations, pool shell structure, bonding of all metal parts, electrical rough-in, main drains and associated piping, distance to glazing.

<u>DECK:</u> Slab reinforcement and deck drains, bonding of all metal equipment and parts, lighting, including potting compound, electrical deck box, suction and return piping under minimum pressure test.

<u>FINAL</u>: Location and installation of all equipment, Barrier requirements as per plan, Electrical receptacles and finished electric hook-ups, Completed piping and valve system, Gas heaters installed and connected to gas lines (if applicable).

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 25094

CONTRACTOR Holland Pools

PHONE 407-830-5327

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL 887	Print Name David Pruett License #: EC 0002923	Signature () and Neuth Phone #:904-272-7225
MECHANICAL/ A/C	Print NameLicense #:	SignaturePhone #:
PLUMBING/ GAS	Print NameLicense #:	SignaturePhone #:
ROOFING	Print NameLicense #:	SignaturePhone #:
SHEET METAL	Print NameLicense #:	SignaturePhone #:
FIRE SYSTEM/ SPRINKLER	Print NameLicense#:	Signature Phone #:
SOLAR	Print NameLicense #:	SignaturePhone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR		9	
METAL BLDG ERECTOR			10

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

repared by: yndi Skinner/Elaine R. Davis American Title Services of Lake City, Inc. 30 SW Main Boulevard ake City, Florida 32025

ile Number: 05-638

Inst:2005023630 Date:09/26/2005 Time:09:10

Doc Stamp-Deed: 1399.30

_DC,P.DeWitt Cason,Columbia County B:1059 P:1508

Warranty Deed

Made this September 22, 2005 A.D.

3y Kevin L. Bedenbaugh, Sr. and Kevin Bedenbaugh, Jr., PO Box 1416, Live Oak, FL 32064, hereinafter called the grantor,

o Stacey S. Turner, whose post office address is: 260 SE Mill Creek Court, Lake City, FL 32025, hereinafter called the grantee:

(Whenever used herein the term "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

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 into the grantee, all that certain land situate in Columbia County, Florida, viz:

Lot 47, of Creekside, a Subdivision, according to the Plat thereof, as recorded in Plat Book 7, at Page 124-125, of the Public Records of Columbia County, Florida.

Said property is not the homestead of the Grantor(s) under the laws and constitution of the State of Florida in that neither Grantor(s) or any members of the household of Grantor(s) reside thereon.

Parcel ID Number: R02939-147

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise 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 lefend 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 31, 2004.

In Witness Whereof, the said grantor has signed	and sealed these presents the day and year first above written.	
Signed, sealed and delivered in our presence:		
Syndi Sunner Witness Printed NameLYNDI SKINNER	Kevin L. Bedenbaugh, Sr. Address: PO Box 1416, Live Oak, FL 32064	al)
Megan Marable Witness Printed Name	Kevin Bederbaugh, Jr. (Se	al)
State of Florida County of Columbia		
The foregoing instrument was acknowledged before me this 2 Bedenbaugh, Jr., who is/are personally known to me or who has personally known to m	22nd day of September, 2005, by Kevin L. Bedenbaugh, Sr. and produced Known as identification.	Kevin
Lyndi Skinner My Commission I Expires Septemb	Notary Public Print Name:	_

Columbia County Property Appraiser

DB Last Updated: 11/4/2010

Parcel: 12-4S-16-02939-147

<< Next Lower Parcel | Next Higher Parcel >>

Tax Collector Tax Estimator

tor

Property Card

Parcel List Generator

Search Result: 1 of 1

2010 Tax Year

Interactive GIS Map

Owner & Property Info

Owner's Name	TURNER STACEY S					
Mailing Address		129 SW INWOOD CT LAKE CITY, FL 32025				
Site Address	129 SW INWOOD	129 SW INWOOD CT				
Use Desc. (code)	SINGLE FAM (000	SINGLE FAM (000100)				
Tax District	2 (County)	Neighborhood	12416			
Land Area	0.680 ACRES	Market Area	06			
Description	NOTE: This descrip this parcel in any le	otion is not to be used as the Leg gal transaction.	al Description for			
LOT 47 CREEKSIDE S/D	. WD 1038-1412, WD	1059-1508.				



Property & Assessment Values

2010 Certified Values		
Mkt Land Value	cnt: (0)	\$21,600.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (1)	\$185,430.00
XFOB Value	cnt: (3)	\$8,890.00
Total Appraised Value		\$215,920.00
Just Value		\$215,920.00
Class Value		\$0.00
Assessed Value		\$215,920.00
Exempt Value	(code: HX)	\$50,000.00
Total Taxable Value	Other: \$165,	Cnty: \$165,920 920 Schl: \$190,920

NOTE: 2011 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes. Show Working Values

Sales History

Show Similar Sales within 1/2 mile					
	0 1 00 1				

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
9/22/2005	1059/1508	WD	I	Q		\$199,900.00
2/18/2005	1038/1412	WD	V	Q		\$28,900.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	2005	COMMON BRK (19)	1960	3828	\$185,430.00
	Note: All S.F. calculations are based on exterior building dimensions.					

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0166	CONC,PAVMT	2005	\$3,615.00	0001446.000	0 x 0 x 0	(000.00)
0166	CONC,PAVMT	2009	\$2,475.00	0000990.000	0 x 0 x 0	(00.00)
0080	DECKING	2009	\$2,800.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000100	SFR (MKT)	1 LT - (0000000.680AC)	1.00/1.00/1.00/1.00	\$21,600.00	\$21,600.00

Columbia County Property Appraiser

DB Last Updated: 11/4/2010

1 of 1

3867196500

MAGNOLIA PEDIATRICS

COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave.. Suite B-21

Lake City, FL 32035

Office: 386-758-1008 Fax: 386-758-2160



NOTICE TO SWIMMING POOL OWNERS

approval and use of my pool. I will need all the inspections approved and the required fencing installed in accordance with applicable regulations. The Florida Building Code Chapter 4 Section 24 requires private residential swimming pools, hot tubs, or non-portable spas containing water over 24 inches deep to meet the following pool barrier safety feature requirements:

- The pool access must be isolated by a barrier at least 4 feet high and installed around the perimeter of the pool. Luless the pool is equipped with a safety cover complying with the specifications of American Society for Testing and Materials standard f-1346-91.
- The barrier shall not have any gaps or openings which would allow a child to crawl under, squeeze through or climb over and must be placed no less than 20 inches from the water's edge.
- Gates located in the pool barrier must open outward away from the pool and be both self-closing and self-latching, with a release mechanism not less than 54" above the standing surface at the gate.
- The barrier must be separate from any other fence, wall, or other enclosure surrounding the yard unless the fence, wall or other enclosure or portion thereof is situated on the perimeter of the pool and meets the pool barrier requirements.
- Where a wall of a dwelling serves as part of the barrier one of the following shall apply:
 - 1) All doors and first floor windows with a sill height of less than 48 inches providing direct access from the home
 - to the pool must be equipped with an alarm that has a minimum sound pressure rating of 85 decibels at 10 feet. The alarm shall sound immediately upon opening the window or door unless the temporary bypass mechanism is activated.
 - Or, all doors providing direct access from the home to the pool must be equipped with a self-closing.

latching device with a release mechanism located at least 54 inches above the floor.

According to Florida statutes, failure to comply with these requirements is a misdemeanor of the second degree, punishable by imprisonment for up to 60 days or a fine of up to \$500, except that no penalty shall be imposed if within 45 days after arrest or issuance of a summons or notice to appear, the pool is equipped with the aforementioned safety features and the responsible person attends a drowning prevention education program developed by the Florida Department of Health. I also understand that there are several inspections required in addition to a final inspection for my swimming pool.

Stacy Cure 12-7-10

Owner Signarghe Date

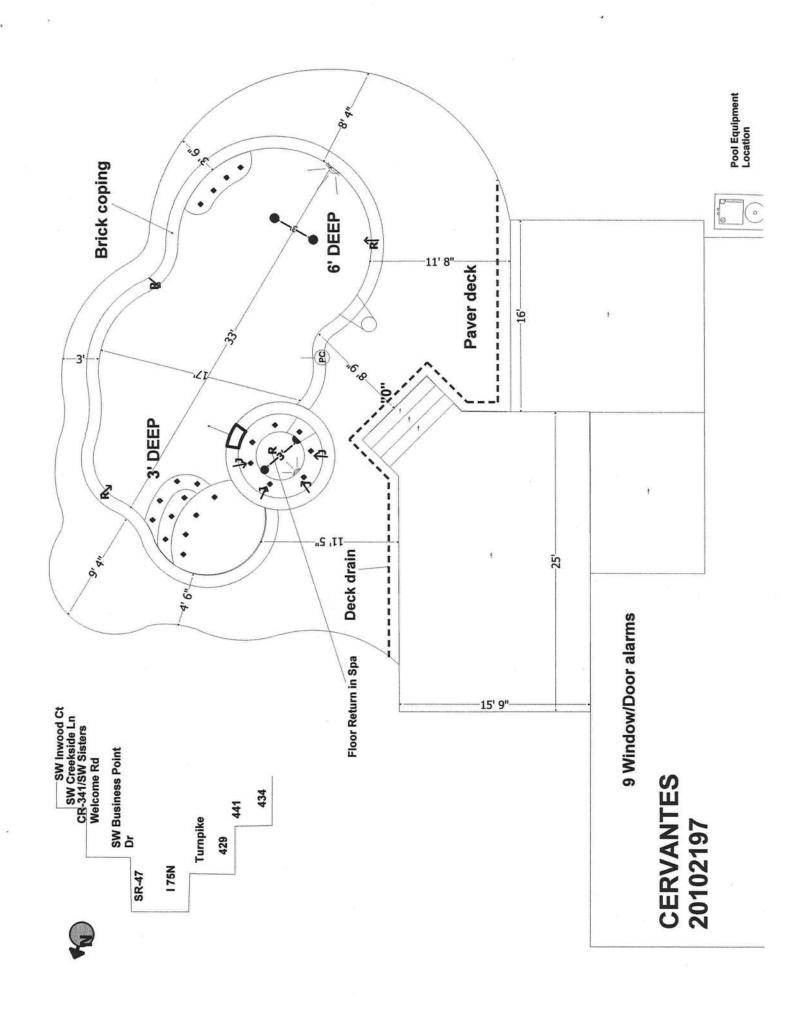
Address: 129 SW INWEOD CT LAWFRITY & 32025

2 Michael Holland 12/14/10

License Numbe

Contractor Signature / Date

	F1				D 16 16 11	3905	
Elevation				Pool Specifications			
			Pool Area: 472 SF	Pool Length: 33 LF	Pool Width: 17 LF		
Lay Dig & Drop	out / Dig / Steel Access: Right	Sod Remov	al·	Pool Perimeter: 99 LF	Pool Depths: 3 - TO - 6	Volume: 15888 Gallons	
Dig & Diop	Access. Right	1000 SF	aı.	Main Drain: 1 PR	Skimmer: 1 EA	Returns: 3 EA	
Benchmark: Set on Pre-site	Beam: 8 inch Bond			Sun Shelf: 1 EA / 45 SF	Extra Step: 0 LF	Filter: CS 100	
Engineering				Filter Pump: Jandy Flo-Pro 1hp	Inline Chlorinator: Inline Standard	Pool Light: Std 300 Watt #1	
Turn Down: 12 by 50 LF				Vac Line: Pressure	Auto Cleaner:	Ozonator:	
De	ecking and Tile				Polaris 360	Clear O3	
Pavers Full: 770 SF	Paver Color: Sand dune			Accessories:	Spa Specifications Spa Area: 38 SF Spa Perimeter		
Coping Type: Bullnose Brick 133 LF	Step Tile Color VR-680 15	: Tile Cole VR-680	or #1:	1 HP BLOWER		22 LF	
Tile Color #2: HL Multi	Deco Drains: 45 LF	13 6" Ra Beam	ised	Spa Jets: 4 EA	Spa Light: Std 300 Watt 1 EA	Pre Plumb Spa	
15 6" Step Riser	Coping Color: Sand dune	Deam		Dam Wall Thickness: 12 IN	Blower	Spa Heater: Jandy 250 Propane	
Screen and Interior Finish				Spa Spillway:			
Windows/Door Alarms: 9 QTY	Safety Fence: 0 LF	Screen V	Valls:	18 IN 1 EA Tile EA			
Lanai Insert: 0 LF				Water Features and Options			
HERE THE SERVICE OF CONTRACT CONTRACT OF C				Fla Falls: N/A	Water Features Pump: N/A		
			N	otes			
12/15/2010 10:21:06 AM	1 - PUMP: Jandy Flo	Pro 1 hp FH	HPM1.0H	IP .			
12/15/2010 10:20:35 AV	A - PIPING: 2.5" Bran	nch, 2" Trun	k, 2" Re	eturn			
12/14/2010 1:18:01 PM	- Elevations to be s	et in field d	ue to ga	arage on site that is no	t on drawing or surve	ey.	
12/7/2010 3:49:05 PM -	There is no HOA fo	r the Cervar	ntes fan	nily	TOTAL	Y BUILDA	
12/7/2010 3:47:59 PM -	There is no HOA fo	r the Cervar	ntes fan	nily	COUR	eceived C	
v				d Pool	= 101	Code	
ales Dens Tim Desir				Altamonte Springs, I 27 Fax (407) 830-64		EXAM	
lales Rep: Tim Davis Name: stacey cervantes				PBPG: 7/124-125	Lot #: 47		
Address: 129 sw inwood ct				Address: 129 sw inwood ct			
City: lake city Zip: 32025				Subdivici	on:		
Phones: 3867552976	Office:	AMBROSO :		Municipality: Columbia Creekside			
Cell: Fax:				Termite Bond Company: Pest Masters			
Customer's Signature:					Date:		
casconici s signature.					Date.		



NOTICE OF COMMENCEMENT	Inst 201012020099 Date:12/17/2010 Time:11.27 AMOC.P DeWitt Cason.Columbia County Page 1 of 1 B.1206 P.1773
	County Clerk's Office Stamp or Seal
Tax Parcel Identification Number 12-45-16-03939-147	County Clerk's Office Stamp or Seal
THE UNDERSIGNED hereby gives notice that improvements will be made to certain real Florida Statutes. the following information is provided in this NOTICE OF COMMENC.	EMENT.
1. Description of property (legal description): Lot 47 Creekide S/ a) Street (job) Address: Log SW INWOOD CH	D 1038-1412/WD 1059-1508
2. General description of improvements:	uning Pool
3. Owner Information a) Name and address: Stacey Cervates 129 Sw T b) Name and address of fee simple titleholder (if other than owner) c) Interest in property Owner	Support C+, Lake City, F1.32025
b) Name and address of fee simple titleholder (if other than owner) c) Interest in property 4. Contractor Information a) Name and address: b) Telephone No.: 4. Surety Information Fax 5. Surety Information	ton Park Dr. A Hamonte Springs, 4. 32714
5. Surety Information a) Name and address:	No. (Opt.)
a) Name and address: b) Amount of Bond:	
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 of	other documents may be severed
a) Name and address: b) Telephone No.: Fax I	Color documents may be served.
b) Telephone No.:Fax I	No. (Opt.)
8. In addition to himself, owner designates the following person to receive a copy of the Li Florida Statutes: a) Name and address: b) Telephone No.: Fax	,
Pax	No. (Opt.)
 Expiration date of Notice of Commencement (the expiration date is one year from the is specified): 	date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAIR STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENT COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BE	E EXPIRATION OF THE NOTICE OF PTER 713, PART I, SECTION 713.13, FLORIDA VIS TO YOUR PROPERTY: A NOTICE OF
STATE OF FLORIDA COUNTY OF COLUMBIA 10.	Haceycercan
Signature of Owner g	Owner's Authorized Office/Director/Partner/Manager
Print Name	Cervantes
The foregoing instrument was acknowledged before me, a Florida Notary, this	by of December 20 10 by:
Stacey Cervantes as Owner	(type of authority, e.g. officer, trustee, attorney
fact) for(ner	ne of party on behalf of whom instrument was executed).
Personally Known OR Produced Identification Type Type	STEPHANIE BAUMGARTNER
Notary Signature Oterhavi Baungart Notary Stamp or S	MY COMMISSION # DD 983166 EXPIRES: April 19, 2014
11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury	I declare that I have read the formation and stores
facts stated in it are true to the best of my knowledge and belief.	I PULL I AM As
Signature of Natura	Person Signing (in line #10 above.)

Determine the Number and Type of Required In-Floor Section Gutlets Compared the Floor Section Gutlets HAYINELD Libert	Filter loss in TDH (from filter dato sheet): 3.0 Fig. Heater loss in TDH (from heater dato sheet): 7.8 Fig. Heater loss in TDH (from heater dato sheet): 7.8 Fig. Heater loss in TDH (from heater dato sheet): 7.8 Total Simplified TDH: 29.0 Fig. Heater loss in TDH (from heater dato sheet): 7.8 Fig. Heater loss in TDH (from heater dato sheet): 7.8 Total Simplified TDH: 29.0 Moin Drain Cover Flow Flow Rate Flow Rate must not exceed approved cover flow rate) Notes: Minimum system flow based 65 Fig. 10 (108) per skimmer of 35 gpm.	inch to keep velocity © 6 fps max. at 80 gpm Maximum System Flow Rate. inch to keep velocity © 16 fps max. at 80 gpm Maximum System Flow Rate. inch to keep velocity © 16 fps max. at 80 gpm Maximum System Flow Rate. inch to keep velocity © 16 fps max. at 80 gpm Maximum System Flow Rate. inch to keep velocity © 16 fps max. at 80 gpm Maximum System Flow Rate. inch to keep velocity © 16 fps max. at 80 gpm Maximum System Flow Rate. 30 inch pipe per 1 ft. © 80 gpm = 10 (from pipe flow/friction loss chart of Fips) (flow teams Fips) 10 Inch pipe flow friction loss chart of Fips) (flow teams Fips) 10 Inch pipe flow friction loss chart of Fips) (flow teams Fips)	mining the maximum sy seified (TDH) Calcula (TDH) Calcula (TDH) Calcula × 60 (min. / hr.) =
TO SO STANDARD TO SO	Velodity - Feet Per Second 10 fee 10 fee	I. If a variable speed pump is used, use the max. pump flow in calculations. 2. For side wall drains, use appropriate side wall drain flow as published by manufacturer. 3. In-Roor suction outlet cover/grate must conform to most recent edition of ASME/ANSI A112.19.8 and be embassed with that edition approval. 4. Pump & Filter make, model and location can not change without submitting a revised plans and TDH worksheet. 1. Flow and Friction Loss Per Foot Schedule 40 PVC Pipe	pump sek one. Pump sek one. Diffied Total Dynamic Head (STDH) natified Total Dynamic Head (STDH) natified SDH Worksheet — Fill in all blanks. OL Cynamic Head (10H) natified Program or other co.cs. Fill in required nks on worksheet & official calculations. Airmum Flew Capacity the new or replacement pump.
Swimming Pool Specification For: Told of Stacey Cervants 129 SW Inwood Ct. Lake City, R 32025	The following cut sheets are included. Pump Filter Main Drains Water Falls	13 300 322 34.6 36.9 38.1 41.4 43.6 45.9 48.2 50.4 62.7 14.5 36.9 38.1 41.4 43.6 45.9 48.2 50.4 62.7 56.0 16. 37.0 38.2 41.5 43.7 46.3 48.2 50.4 52.7 56.0 51.6 57.0 38.2 41.5 43.7 46.3 50.6 52.8 52.6 52.6 52.6 52.7 56.0 51.6 51.7 51.7 51.6 51.7 51.7 51.6 51.7 51.7 51.6 51.7 51.7 51.6 51.7 51.7 51.6 51.7 51.7 51.7 51.7 51.7 51.7 51.7 51.7	Total Head In Feet Conversion Chart Inches Meroury (Vocuum Gauge) 0 2 4, 6 8 10 12 14 16 18 10 0, 2 4, 6 8, 9,0 11,2 13,5 18,1 18,1 20,2 1 2 4,6 8,8 9,0 11,2 13,5 18,1 18,1 20,2 2 4,6 8,8 11,1 13,7 18,0 18,2 28,4 28,1 22,7 28,0 3 8,8 11,1 13,7 18,0 18,2 28,2 28,4 22,7 28,0 4 9,2 11,5 13,8 18,0 18,2 29,5 22,8 28,1 27,2 29,6 5 13,5 13,8 18,0 18,2 29,5 22,8 22,1 27,4 29,5 31,5 32,6 6 13,6 13,8 18,1 18,2 20,5 22,8 22,1 27,4 29,6 31,5 32,6 6 13,6 13,8 18,1 18,2 20,5 22,8 22,1 27,4 29,6 31,5 32,6 6 13,6 13,8 18,1 18,2 20,5 22,8 22,1 27,4 29,6 31,5 32,6 6 13,6 13,7 20,0 28,3 27,5 18,7 20,0 31,5 32,6 6 13,6 20,7 20,0 28,3 27,5 18,7 20,0 31,5 32,6 6 13,6 20,7 20,0 28,3 27,5 18,7 20,0 31,5 32,6 7 18,2 18,1 20,7 20,0 28,3 27,5 18,7 32,0 31,5 32,6 9 20,8 20,7 20,0 28,3 27,5 18,7 32,0 31,5 32,6 9 20,8 20,7 20,0 28,3 27,5 18,7 32,0 31,5 32,6 9 20,8 20,7 20,0 28,3 27,5 18,7 32,0 31,5 32,6 9 20,8 20,7 20,0 28,3 27,5 18,7 32,0 31,5 32,6 9 20,8 20,7 20,0 28,3 27,5 18,7 32,0 31,5 32,6 9 20,8 20,7 20,0 28,3 20,5 20,5 20,6 20,7 32,0 31,5 32,6 9 20,8 20,7 20,7 20,7 20,7 20,7 20,7 20,7 20,7

OWNER'S MANUAL

INSTALLATION, OPERATION, & PARTS

DUAL SUBMERGED SUCTION OUTLET SET

[Commonly called main drains]





Basic safety precautions should always be followed, including the following: Failure to follow instructions can cause severe injury and/or death.

This is the safety-alert symbol. When you see this symbol on your equipment or in this manual, look for one of the following signal words and be alert to the potential for personal injury.

WARNING warns about hazards that could cause serious personal injury, death or major property damage and if ignored presents a potential hazard.

CAUTION warns about hazards that will or can cause minor or moderate personal injury and/or property damage and if ignored presents a potential hazard. It can also make consumers aware of actions that are unpredictable and unsafe.

The NOTICE label indicates special instructions that are important but not related to hazards.



▲ - WARNING - Read and follow all instructions in this owner's manual and on the equipment. Failure to follow instructions can cause severe injury and/or death.

IMPORTANT SAFETY INSTRUCTIONS

USE ONLY HAYWARD GENUINE REPLACEMENT PARTS

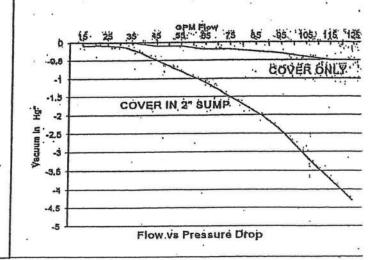


RECOMMENDED SYSTEM SPECIFICATIONS: 20/0

ACCEPTABLE PIPE SIZE FOR MAXIMUM RECOMMENDED

SYSTEM FLOW RATE PER APSP-7

Pipe Size Flow rate [mm] GPM		Pipe Size [mm]	Flow rate GPM [Liter/N	The state of the s	
1·1/2" [50]	[Liter/Min] 40: [150]	2 ½" [75]	90 [340]	, ·.	
2" [63]	63 [240]	3" [90]	138 [522]		
<i>y.</i>	Chai	rt 1			



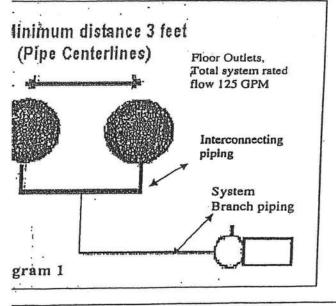
'GX1048E Suction Outlet Covers are rated for Floor Only at 125 GPM 'G1048EW Suction Outlet Covers are rated for Wall or Floor at 72 GPM

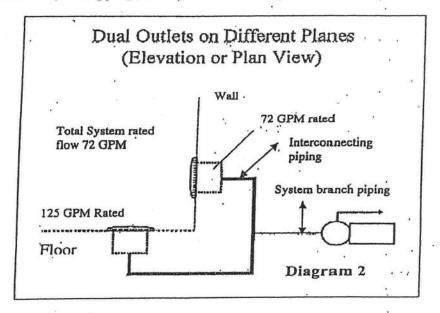
FIG 1 Note: I" Hg = 1.13 Pt of Head

the event of one suction outlet being blocked, the remaining suction outlets serving that system shall have a pw rating capable of the full flow of the pump(s) for the specific suction system.

These covers are individually rated for 125 GPM. For a desired flow rate through the pump of 100 GPM, a minimum pipe size from the Chart 1 is selected at 3". At the desired flow of 100 GPM one cover could be partially blocked and the other suction outlet flow would be below the rated 125 GPM of the "Floor" mounted suction outlet cover. Since there are two outlets flowing in normal operation, and the allowable velocity in the interconnecting piping is only 3ft/sec, the same pipe size is required in the interconnecting piping.

ample: In the System shown in Diagram 2, one (1) "Floor Only" suction outlet cover, rated at 125 GPM, and one (1) "Wall or Floor" suction outlet cover, rated at 72 GPM are selected and mounted. For a desired flow rate through the pump of 50 GPM, a minimum pipe size from the Chart 1 is selected at 2". At the desired flow of 50 GPM either cover could be totally blocked and the other suction outlet flow would be below the rated 72 GPM of the wall mounted suction outlet cover. Note: Flow may be limited by entrapping force in dual suction systems.

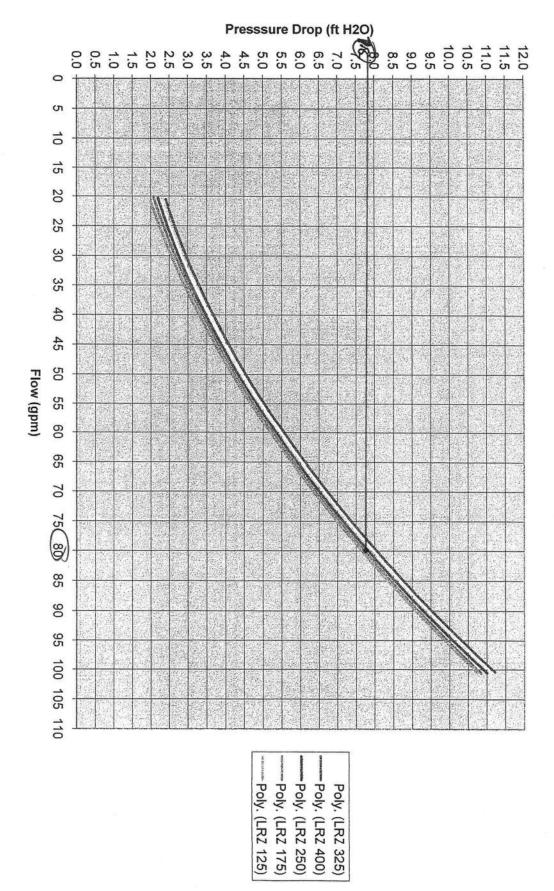






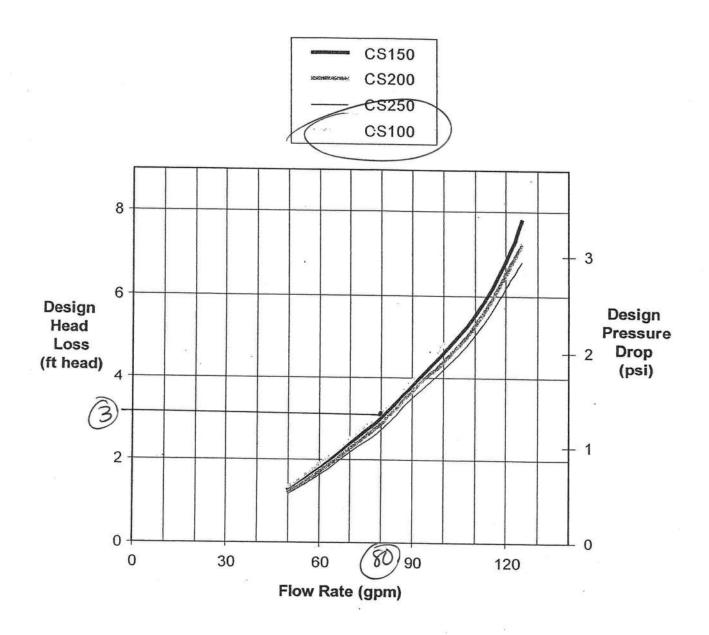
www.haywardpool.com

LRZ With a Polymer Header Heat Exchanger
Pressure Drop vs. Flow



10.1 Jandy® Cartridge Filter, CS Series

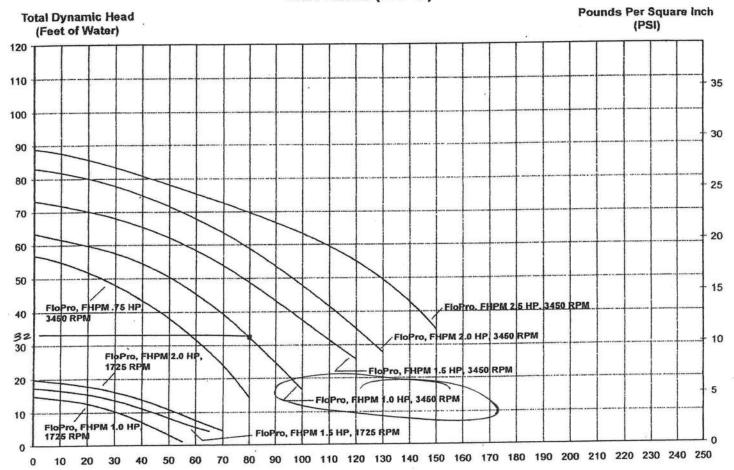
20102197



7.3 Performance Curves

20102197

Jandy FloPro Series Pumps Max-Rated (FHPM)



Flow Rate, Gallons Per Minute (GPM)

