

DATE 05/19/2008

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000027024

APPLICANT GARY YURKE PHONE 386 935-2951
ADDRESS 4762 NW US 129 BELL FL 32619
OWNER CHAD COOK PHONE 288-2002
ADDRESS 319 NE JACKSONVILLE LOOP LAKE CITY FL 32025
CONTRACTOR GARY YURKE PHONE 386 935-2951
LOCATION OF PROPERTY 90E, TL JACKSONVILLE LOOP, 7TH LOT ON LEFT

TYPE DEVELOPMENT RE-ROOF ON SFD ESTIMATED COST OF CONSTRUCTION 6850.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT REAR SIDE
NO. EX.D.U. FLOOD ZONE DEVELOPMENT PERMIT NO.

PARCEL ID 33-3S-17-06368-000 SUBDIVISION
LOT BLOCK PHASE UNIT TOTAL ACRES

RC29027303
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING X08-179 BK JH N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: NOC ON FILE

Check # or Cash 1166

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 \$ 35.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 0.00 ZONING CERT. FEE \$ FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ CULVERT FEE \$ TOTAL FEE 35.00
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."

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 TO BE IN ACTIVE PROGRESS WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS.

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



Columbia County

BUILDING DEPARTMENT

Re Roof of a Single Family Dwelling

Inspection Affidavit

RE: Permit # 000027024

I GARY YURKE, licensed as a(n) Contractor* /Engineer/Architect,
(please print name and circle Lic. Type) FS 468 Building Inspector*

License #: RC 29027303

On or about 6-7-08 10:00 am, I did personally inspect the roof
(Date & time)

deck nailing and/or secondary water barrier work at 319 NE Jacksonville Loop,
(circle one) (Job Site Address)

Lake City FL, 90 E turn left on Jacksonville Loop 7th Lot on Left

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.)

[Signature]
Signature

STATE OF FLORIDA
COUNTY OF

Sworn to and subscribed before me this 9 day of June, 2008

By Gary Yurke

Notary Public, State of Florida



L.Hodson
(Print, type or stamp name)

Commission No.: June 28, 2008

Personally known _____ or

Produced Identification ✓

Type of identification produced. 4620-299-75-050-0

* General, Building, Residential, or Roofing Contractor or any individual certified under 468 F.S. to make such an inspection.

* Include photographs of each plane of the roof with the permit # or address # clearly shown marked on the deck for each inspection.

Columbia County Building Permit Application

For Office Use Only Application # 0805-34 Date Received 5/19/08 By GP Permit # 27024

Zoning Official _____ Date _____ Flood Zone _____ Land Use _____ Zoning _____

FEMA Map # _____ Elevation _____ MFE _____ River _____ Plans Examiner _____ Date _____

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

IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____

School _____ = TOTAL _____

Septic Permit No. _____ Fax _____

Name Authorized Person Signing Permit GARY YURKE Phone (386) 935-2951

Address 4762 NW US 129 BELL, FL. 32619

Owners Name CHAD COOK Phone (386) 288-2002

911 Address 319 NE JACKSONVILLE LOOP LAKE CITY FL 32025

Contractors Name INTEGRITY ROOFING / GARY YURKE Phone (386) 935-2951

Address 4762 NW US 129 BELL, FL 32619

Fee Simple Owner Name & Address N/A

Bonding Co. Name & Address N/A


Architect/Engineer Name & Address N/A

Mortgage Lenders Name & Address N/A

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress Energy

Property ID Number 33-35-17-06368-000 Estimated Cost of Construction 6850.00

Subdivision Name N/A Lot _____ Block _____ Unit _____ Phase _____

Driving Directions 90E, TL  Jacksonville loop on left side (Just across from SS offices) take Jacksonville loop about 1/4 mile on the left side. Number of Existing Dwellings on Property 1

Construction of he-roof on SFD Total Acreage _____ Lot Size _____

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height _____

Actual Distance of Structure from Property Lines - Front _____ Side _____ Side _____ Rear _____

Number of Stories _____ Heated Floor Area _____ Total Floor Area _____ Roof 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.

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.

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.

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 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. I further understand the above written responsibilities in Columbia County for obtaining this Building Permit.



Owners Signature

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.

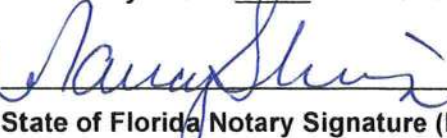


Contractor's Signature (Permitee)

Contractor's License Number RC19027303
Columbia County
Competency Card Number _____

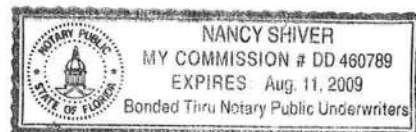
Affirmed under penalty of perjury to by the Contractor and subscribed before me this 19 day of May 2008

Personally known _____ or Produced Identification FL DL



State of Florida Notary Signature (For the Contractor)

SEAL:



Florida Department of
**Business
Professional
Regulation**



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2:07:23 PM 5/19/2008

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Licensee Details

Licensee Information

Name: **YURKE, GARY WARREN (Primary Name)**
Main Address: **INTEGRITY ROOFING (DBA Name)**
4760 NW US 129
BELL Florida 32619
County: **GILCHRIST**

License Mailing:

LicenseLocation: **4762 NW US 129**
BELL FL 32619
County: **GILCHRIST**

License Information

License Type: **Registered Roofing Contractor**
Rank: **Reg Roofing**
License Number: **RC29027303**
Status: **Current,Active**
Licensure Date: **10/05/2006**
Expires: **08/31/2009**

Special Qualifications **Qualification Effective**
Qualified Business License Required **10/05/2006**

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Chad Cook
319 NE JACKSONVILLE LOOP
LAKE CITY FL 32025

INTEGRITY ROOFING
4762 NW US 129
BELL FL 32619

105 bd.	TAMKO 25 yr. ELITE SHINGLES	ASTM D 3462 (FL 673)
3 rolls	PERMA SYNTHETIC ROOF UNDERLAYMENT	ASTM D 226
1	3" Lead roof FLASHING	—
1 Box	CR30 GAL 1 1/4" ROOFING COIL NAIL 7.2	—
50 ft	GALV. VALLEY METAL	—

@ CAM110M01 S CamaUSA Appraisal System
5/19/2008 13:51 Property Maintenance
Year T Property Sel
2008 R#33-35-17-06368-000 *
Owner COOK CHAD & SANDRA G + Conf
Addr 1827 SW MCFARLANE AVE

Columbia County
15267 Land 001
AG 000
39549 Bldg 001
950 Xfea 002
55766 TOTAL B*
1.001 Total Acres
Renewal Notice

City,St LAKE CITY FL Zip 32025 Retain Cap? N
Country (PUD1) (PUD2) (PUD3) MKTA03

Appr By DFTW Date 1/20/2005 AppCode UseCd 000100 SINGLE FAMILY
TxDist Nbhd MktA ExCode Exemption/% TxCode Units Tp
002 33317.02 06

DORTCH'S

House# 319 Street JACKSONVILLE MD LP Dir NE #

- City LAKE CITY

Subd N/A Condo .00 N/A

Sect 33 Twn 3S Rnge 17 Subd Blk Lot

Legals NW1/4 OF BLOCK 8 DORTCH'S SURVEY OF NW1/4 OF NE1/4.

Map#

Mnt 10/23/2006 GAIL

F1=Task F2=ExTx F3=Exit F4=Prompt F11=Docs F10=GoTo PgUp/PgDn F24=More

NOTICE OF COMMENCEMENT

County Clerk's Office Stamp or Seal

Tax Parcel Identification Number 23-35-17-06368-000

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): 319 NE JACKSONVILLE LOOP LAKE CITY FL 32025
a) Street (job) Address: _____
2. General description of improvements: RE-ROOF
3. Owner Information
a) Name and address: CHAD COOK 319 NE JACKSONVILLE LOOP, LAKE CITY FL.
b) Name and address of fee simple titleholder (if other than owner) _____
c) Interest in property RE-ROOF
4. Contractor Information
a) Name and address: INTEGRITY ROOFING 4762 NW US129 LAKE CITY FL 32025
b) Telephone No.: (386) 935-2957 Fax No. (Opt.) _____
5. Surety Information
a) Name and address: _____
b) Amount of Bond: _____
c) Telephone No.: _____
6. Lender
a) Name and address: _____
b) Phone No.: _____
Inst 200812009707 Date 5/19/2008 Time 2:28 PM
24 DC P DeWitt Cason, Columbia County Page 1 of 1 B:1150 P:1927
7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served:
a) Name and address: _____
b) Telephone No.: _____ Fax No. (Opt.) _____
8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(l)(b), Florida Statutes:
a) Name and address: _____
b) Telephone No.: _____ Fax No. (Opt.) _____
9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified): MAY 19, 2008

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.

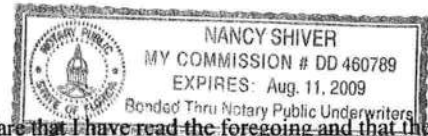
STATE OF FLORIDA
COUNTY OF COLUMBIA

10. Chad Cook
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
CHAD COOK
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 19 day of May, 2008, by:
Chad Cook as _____ (type of authority, e.g. officer, trustee, attorney
fact) for _____ (name of party on behalf of whom instrument was executed).

Personally Known _____ OR Produced Identification _____ Type _____

Notary Signature Nancy Shiver Notary Stamp or Seal:



11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Chad Cook
Signature of Natural Person Signing (in line #10 above.)



Permit #

000027024

Address

34 NE Jacksonville Loop

Property Location

90 E TL Jacksonville Loop
7th Lot on Left

Roofing

Integrity Roofing
4762 NW 15th St
Hall, FL 32614

Permit #

000027024

Address

34 NE Jacksonville Loop

Property Location

90 E TL Jacksonville Loop
7th Lot on Left

Roofing

Integrity Roofing
4762 NW 15th St
Hall, FL 32614

