

DATE 04/23/2008

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000026948

APPLICANT CHARLES NORRIS PHONE 386-233-5640  
ADDRESS 475 SE LEHIGH LN LAKE CITY FL 32025  
OWNER DHIMANT SONI PHONE 386-365-1988  
ADDRESS 4387 SW SR 47 LAKE CITY FL 32025  
CONTRACTOR WILLIAM WOOD PHONE 755-8699  
LOCATION OF PROPERTY 47 S, LEFT AT THE SUBWAY PAST CR 242

TYPE DEVELOPMENT RE-ROOF CD ESTIMATED COST OF CONSTRUCTION 6500.00  
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES  
FOUNDATION WALLS ROOF PITCH FLOOR  
LAND USE & ZONING MAX. HEIGHT 35  
Minimum Set Back Requirments: STREET-FRONT REAR SIDE  
NO. EX.D.U. 1 FLOOD ZONE NA DEVELOPMENT PERMIT NO.

PARCEL ID 30-4S-17-08904-002 SUBDIVISION  
LOT BLOCK PHASE UNIT TOTAL ACRES

CCC058270  
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor  
EXISTING X08-126 LH LH N  
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: EXISTING BUILDING / SUBWAY

NOC ON FILE

Check # or Cash CASH

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 Sheathing/Nailing  
date/app. by date/app. by date/app. by  
Framing Rough-in plumbing above slab and below wood floor  
date/app. by date/app. by  
Electrical rough-in Heat & Air Duct Peri. beam (Lintel)  
date/app. by date/app. by date/app. by  
Permanent power C.O. Final Culvert  
date/app. by date/app. by date/app. by  
M/H tie downs, blocking, electricity and plumbing Pool  
date/app. by date/app. by  
Reconnection Pump pole Utility Pole  
date/app. by date/app. by date/app. by  
M/H Pole Travel Trailer Re-roof  
date/app. by date/app. by 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 Permit Application

35.00

For Office Use Only Application # 0804-47 Date Received 4/23/08 By LH Permit # 26948

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. X08-126 Fax \_\_\_\_\_Name Authorized Person Signing Permit Charles Norris Phone 386-233-5640Address 475 SE Lehigh Lane Lake City FL 32025Owners Name DHIMANT SONI Phone 386 365-1988911 Address 4387 SW SR 47 Lake City FL 32025Contractors Name WIND TECH CONTRACTING CORP. Phone 386 755-8699Address PO Box 3535

Fee Simple Owner Name &amp; Address \_\_\_\_\_

Bonding Co. Name &amp; Address \_\_\_\_\_

Architect/Engineer Name &amp; Address \_\_\_\_\_

Mortgage Lenders Name &amp; Address \_\_\_\_\_

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

Property ID Number 30-45-17-08904-002 Estimated Cost of Construction 6500.00Subdivision Name HILLSIDE Lot 1 Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase \_\_\_\_\_Driving Directions 41S TO 47S PAST INTERSTATE 75 APPROX 1 MILE ON LEFT

Number of Existing Dwellings on Property \_\_\_\_\_

Construction of REEROOF OF PDQ PIZZA 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 6/12

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.



**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**

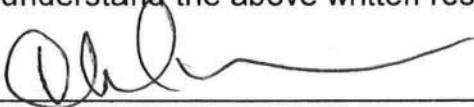
According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects 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.

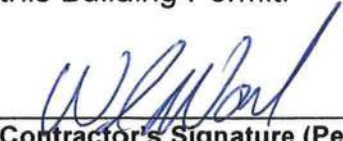
**WARNING TO OWNER:** YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY 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

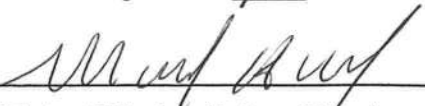
**CONTRACTORS AFFIDAVIT:** By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit.



Contractor's Signature (Permitee)

Contractor's License Number CC058270  
Columbia County  
Competency Card Number \_\_\_\_\_

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 23 day of April 2008.  
Personally known ☒ or Produced Identification \_\_\_\_\_



State of Florida Notary Signature (For the Contractor)

SEAL:



# PDQ PIZZA

15 PANELS @ 23' 1"

15 PANELS @ 19' 3"

3 BAGS SCREWS

45 FT OF RIDGE CAP

90 FT EAVE DRIP

90 FT RAKE TRIM

5 LB BOX OF 3" SCREWS

62 - 16 FT 1x4

2 TUBES OF SILICONE CAULK



@ CAM110M01 S CamaUSA Appraisal System  
4/15/2008 12:58 Property Maintenance

Columbia County

Year T Property Sel  
2008 R 30-4S-17-08904-002 ... \*  
Owner SONI DHIMANT & GITA Conf  
Addr 4387 SW STATE ROAD 47

36590 Land 001 \*  
AG 000  
160239 Bldg 002 \*  
8708 Xfea 006 \*  
205537 TOTAL B\*  
.839 Total Acres

City, St LAKE CITY FL Zip 32024  
Country (PUD1)

Retain Cap? N  
(PUD2) (PUD3) MKTA06  
Renewal Notice

Appr By CP Date 6/21/2006 AppCode UseCd 001100 STORES, 1 STORY  
TxDist Nbhd MktA ExCode Exemption/% TxCode Units Tp  
002 30417.01 06  
HILLSIDE

House# Street CON STORE AND PDQ PIZZA MD Dir #  
City

Subd N/A Condo .00 N/A  
Sect 30 Twn 4S Rnge 17 Subd Blk Lot  
Legals COMM SW COR OF LOT 1 HILLSIDE S/D, RUN NE ALONG RD R/W 88 FT  
FOR POB, RUN NE 245 FT, E 150 FT, SW 245 FT, W 150 FT TO POB +  
Map# Mnt 8/10/2006 CHERYL  
F1=Task F2=ExTx F3=Exit F4=Prompt F11=Docs F10=GoTo PgUp/PgDn F24=More

# NOTICE OF COMMENCEMENT

Tax Parcel Identification Number 30-45-17-08904-002

County Clerk's Office Stamp or Seal

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): HILLSIDE S/D LOT 1  
a) Street (job) Address: \_\_\_\_\_
2. General description of improvements: REEROOF
3. Owner Information  
a) Name and address: DHIMANT SONI  
b) Name and address of fee simple titleholder (if other than owner) \_\_\_\_\_  
c) Interest in property \_\_\_\_\_
4. Contractor Information  
a) Name and address: WIND TECH CONTRACTING CORP.  
b) Telephone No: 3510 755-8699 Fax No. (Opt.) \_\_\_\_\_
5. Surety Information  
a) Name and address: \_\_\_\_\_  
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 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(1)(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): \_\_\_\_\_

**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

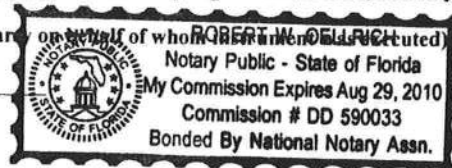
10. [Signature]  
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager  
DHIMANT SONI  
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 21<sup>st</sup> day of April, 2008, by:

Dhimant Soni as D/P/M (type of authority, e.g. officer, trustee, attorney fact) for \_\_\_\_\_ (name of party on behalf of whom instrument executed)

Personally Known ☒ OR Produced Identification \_\_\_\_\_ Type \_\_\_\_\_

Notary Signature Robert W. Oelrich Notary Stamp or Seal:



—AND—

I, Verifican 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

Robert W. Oelrich  
Signature of Natural Person Signing (in line #10 above.)