| DATE 09/19/2016 Columbia County B This Permit Must Be Prominently Posted | - Possel D. I. C |
|---|---|
| APPLICANT KRISTA SHEPPARD | 000004407 |
| ADDRESS 1947 NW TIGAR DRAIN | PHONE 813-486-0325 |
| OWNER KRISTA SHEPPARD | WHITE SPRINGS H. 32096 PHONE 813-486-0325 |
| ADDRESS 1947 NW TIGER DRAIN RD | WHITE SPRINGS FL 32096 |
| CONTRACTOR KRISTA SHEPPARD | PHONE 813-486-0325 |
| LOCATION OF PROPERTY 41 N. L. SUWANNEE VALLEY F | |
| ON RIGHT BEFORE CLIMETAR | |
| TYPE DEVELOPMENT MODULAR, UTILITY ES | HMATED COST OF CONSTRUCTION 0.00 |
| HEATED FLOOR AREA TOTAL ARE | A HEIGHT STORILS |
| FOUNDATION WALLS | ROOF PITCH FLOOR |
| LAND USE & ZONING ESA-2 | MAX. HEIGHT 35 |
| Minimum Set Back Requirments: STREET-FRONT 30,00 | REAR 25,00 SIDE 25,00 |
| NO. EX.D.U. 0 FLOOD ZONE AE | DEVELOPMENT PERMIT NO. 16-005 |
| PARCEL ID 14-2S-15-00066-002 SUBDIVISIO | |
| LOT BLOCK PHASE UNIT | TOTAL ACRES 20.00 |
| | - 1/ 2 Ci |
| OWNER Culvert Permit No. Culvert Waiver Contractor's License Nun | Applicant Owner Contractor |
| EXISTING 16-0051-N LHc | N Applicant/Owner Contractor |
| Driveway Connection Septic Tank Number 1.U & Zoning check | ted by Approved for Issuance New Resident Time/STUP No. |
| COMMENTS: NOC ON FILE | |
| 1 FOOT RISE REC'D, MINIMUM FLOOR LLEVATION 87.0', NEED F | HAVAHON |
| CERTIFICATE BEFORE FINAL | Check # or Cash CASH |
| FOR BUILDING & ZONIN | IG DEPARTMENT ONLY (footer Slab) |
| Temporary Power Loundation | Monolithic Monolithic |
| date/app, by | date/app, by date/app, by |
| Under slab rough-in plumbing Slab date/app, by | Sheathing Nailing date app, by |
| Framing Insulation | Time. |
| | te app, by |
| Rough-in plumbing above slab and below wood floor | Electrical rough-in date app, by |
| Heat & Air Duct Peri, beam (Linte | ** * |
| date/app_by Permanent power C.O. Final | date app, by date app, by |
| date/app, by | Culvertdate/app, by |
| Pump pole Utility Pole M/II tie de | owns, blocking, electricity and plumbing |
| Reconnection RV | date app, by |
| date/app. by | date/app. by date/app. by |
| BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEI | S 0.00 SURCHARGEFEES 0.00 |
| MISC. FEES \$ 350.00 ZONING CERT. FEE \$ 50.00 | FIRE FEE \$ 0.00 WASTE FEE \$ |
| FLOOD DEVELOPMENT FEE \$ 50.00 FLOOD ZONE FEE \$ 25.00 | CULVERT FEES TOTAL FEE 475.00 |
| INSPECTORS OFFICE | CLERKS OFFICE (SUR) |
| NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC I NOTICE: ALL OTHER APPLICABLE STATE OR FEDERAL PERMITS SI PERMITTED DEVELOPMENT. | |

"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. J Sected Change

Columbia County New Building Permit Application

| 70 |
|--|
| For Office Use Only Application # 1607-39 Date Received 7/13 By 16 Permit # 34467 |
| Zoning Official Ut/CS Date 7-15-16 Flood Zone AE Land Use ESA Zoning ESA-Z |
| FEMA Map # Olleto Elevation 86,0 MFE 87,0 River Summer Plans Examiner 7.C1 Date 7-14-16 |
| Comments_/ Rise Cert Rec'd |
| NOC DEH Deed or PA Site Plan State Road Info Well Tetter 1911 Sheet Parent Parcel # |
| Dev Permit # 16-005 In Floodway Letter of Auth. from Contractor F W Comp. letter Owner Builder Disclosure Statement Land Owner Affidavit Ellisville Water App Fee Paid Sub VF Form |
| Septic Permit No. 16-0051-N OR City Water Fax |
| *Applicant (Who will sign/pickup the permit) 4-15/a Shappard Phone 813-486-2325 |
| Address 1947 Tigar Drain White Springs Fl 32096 |
| FOwners Name Krista & Eddie Shappard Phone 813-486-0325 |
| 911 Address 1947 NWTigar DrANRO, White Springs, Fl 32096 |
| Contractors Name Krister Sheppand Phone 813-486-0325 |
| Address Same AS ARNE |
| Contractor Email ***Include to get updates on this job. |
| Fee Simple Owner Name & Address |
| Bonding Co. Name & Address |
| Borrolling Co. Name & Address |
| Architect/Engineer Name & AddressIon & Biociae, Architect/Engineer Name & AddressIon & Biociae, Architect |
| Architect/Engineer Name & Address Na |
| Architect/Engineer Name & AddressIon A BUCZIAK, AMENITED - 2325 ULMESTA SE. 21 2325 ULMESTA SE. 21 2325 ULMESTA SE. 21 2325 ULMESTA SE. 21 |
| Architect/Engineer Name & Address Name & Address Addre |
| Architect/Engineer Name & Address Address Active & Bucklar, Amanifer - Clay Elec. Suwannee Valley Elec Duke Energy Property ID Number 14 - 75 - 15 - 00066 - 002 Estimated Construction Cost 10,000. |
| Architect/Engineer Name & Address Address Active & Bucklar, Amanifer - Clay Elec. Suwannee Valley Elec Duke Energy Property ID Number 14 - 75 - 15 - 00066 - 002 Estimated Construction Cost 10,000. |
| Architect/Engineer Name & Address Address Address Sier & Cigniu, L., 78. 33-767 Mortgage Lenders Name & Address Circle the correct power company - FL Power & Light - Clay Elec. Suwannee Valley Elec Duke Energy |
| Architect/Engineer Name & Address Address Active & Bucklar, Amanifer - Clay Elec. Suwannee Valley Elec Duke Energy Property ID Number 14 - 75 - 15 - 00066 - 002 Estimated Construction Cost 10,000. |
| Architect/Engineer Name & Address Addr |
| Architect/Engineer Name & Address Addr |
| Architect/Engineer Name & Addresson A BUDZIAK, MUNTET - 2325 ULTRIBLE SE 23762 Mortgage Lenders Name & Address Circle the correct power company - FL Power & Light - Clay Elec. Suwannee Valley Elec Duke Energy Property ID Number 19 - 75-15 - 00066 - 002 |
| Architect/Engineer Name & Address Addr |
| Architect/Engineer Name & Addresson A BUDZIAK, MUNTET - 2325 ULTRIBLE SE 23762 Mortgage Lenders Name & Address Circle the correct power company - FL Power & Light - Clay Elec. Suwannee Valley Elec Duke Energy Property ID Number 19 - 75-15 - 00066 - 002 |

Columbia County Building Permit Application

CODE: Florida Building Code 2014 and the 2011 National Electrical Code.

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.

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 pursued in good faith or a permit has been issued.

TIME LIMITATIONS OF PERMITS: 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 CONTRACTOR AND AGENT: 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 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. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

Print Owners Name

Owners Signature

**Property owners <u>must sign</u> here <u>before</u> any permit will be issued.

**If this is an Owner Builder Permit Application then, ONLY the owner can sign the building permit when it is issued.

<u>CONTRACTORS AFFIDAVIT:</u> 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 including all application and permit time limitations.

Contractor's Signature

Contractor's License Number

Columbia County

Competency Card Number

Affirmed under penalty of perjury to by the Contractor and subscribed before me this

/ day of

__ 20___.

Personally known_____ of Produced Identification

SEAL:

State of Florida Notary Signature (For the Contractor)

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

Clerk's Office Stamp

Inst: 201612015200 Date: 09/19/2016 Time: 3:07PM Page 1 of 1 B: 1322 P: 573, P.DeWitt Cason, Clerk of Court

Columbia, County, By: BA

Deputy Clerk

14-25-15-00066-002

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): 1947 NW Tiger Drain White Springs fe 32096 a) Street (job) Address: | |
|---|--|
| 2. General description of improvements: | |
| 3. Owner Information or Lessee information if the Lessee contracted for the improvements: (a) Name and address: // rista & Eddie Shaperd (b) Name and address of fee simple titleholder (if other than owner) (c) Interest in property | |
| 4. Contractor Information a) Name and address: Owner Builder | |
| (b) Telephone No : | |
| c) Telephone No.:6 Lender | |
| a) Name and address: | |
| 7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes a) Name and address: b) Telephone No.: | |
| b) Phone No | |
| a) Name:OF | |
| 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 of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager | |
| Krista Sheppard Printed Name and Signatory's Title/Office | |
| The foregoing instrument was acknowledged before me, a Florida Notary, this 19 day of Systemlan 20 16, by: | |
| (Name of Person) (Type of Authority) for | |
| Personally Known OR Produced Identification Type FLDL | |
| Notary Signature Notary Stamp Outer Hodson My Commission & FF 978102 EXPIRES: July 14, 2020 Bonded Thru Notary Public Undensitiers | |

Gary Gill, PE Gill Engineering Services, Inc 426 SW Commerce Dr. Suite 130-M Lake City, FL 32025 (Phone) 386.590.1242

ggill@gillengineeringservices.com

September 19, 2016

Columbia County
Building and Zone Department
Lake City, FL

SUBJECT:

Eddie and Krista Sheppard 1947 Tiger Drain Rd, White Springs, FL 1 Ft Rise

Edie and Krista Sheppard proposed to constructed a 864 ft modular home on the above mention site. The structure will be supported on blocked piers. The parcel is classified as an AE Flood zone site.

Due to the size of the structure and the way it will be support, the 24' x 36' will not cause an increase in the flood zone of more than 1 ft.

Property Info:

Parcel: 14-2S-15-00066-002

County: Columbia STR: S014 T02 R15 Flood Zone: AE BFE: 86 feet

If you should have any questions or concerns, feel free to contact me.

Thank you,

Gary Gill, PE 51942

Digitally signed by Gary Gill
DN: c=U5, st=FL, l=Lake City,
o=Gill Engineering Services,
nc. cn=Gary Gill,
email=ggill@gillengineeringse
rvices.com
Date: 2016.09.19 12:52:09
-04:00
Adobe Acrobat DC version:
2015.017.20253



Legend

Parcels

House Number Labels

Roads

Private

/ Dirt

Other

// Paved

◆ Main

Interstates

Official Zoning Atlas

□ others

□A-1

□A-2

□A-3 □CG

□сн

□CI

CN

□ CSV

□ESA-2

■MUD-I

□PRD □PRRD

□RMF-1

□RMF-2

■RO

RR

RSF-1

■RSF-2 ■RSF-3

☐RSF/MH-1

RSF/MH-2

RSF/MH-3

DEFAULT

Flood Zones

■ 0.2 PCT ANNUAL CHANCE

■A ■AE

DAH

Base Flood Elevations

DEFAULT

Base Flood Elevations

Wetlands

Rivers, Creeks & Streams

/ Others

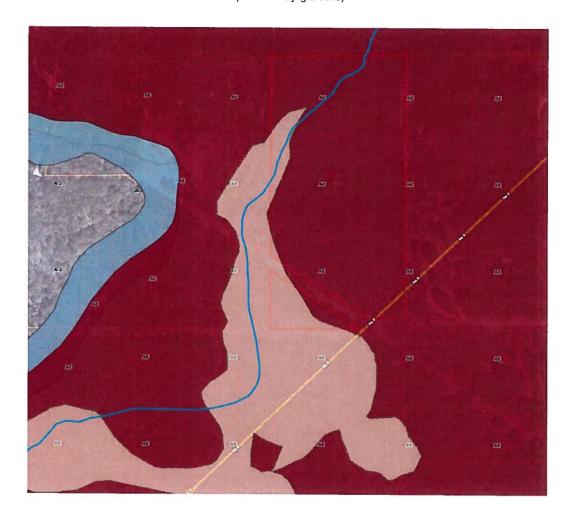
/ CANAL / DITCH

/ CREEK

/STREAM / RIVER

Columbia County, FLA - Building & Zoning Property Map

Printed: Fri Jul 15 2016 14:27:35 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 14-2S-15-00066-002

Owner: SHEPPARD EDDIE R & KRISTA D

Subdivision:

Lot:

Acres: 19.5390072 Deed Acres: 20 Ac

District: 1 Ronald Williams (386)-752-0158

Future Land Uses: Environmentally Sensitive Areas -1

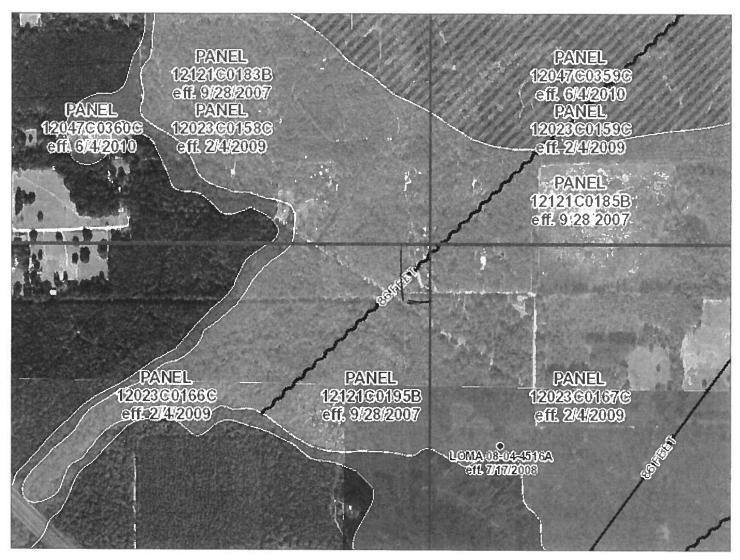
Flood Zones: AE

Official Zoning Atlas: ESA-2

All data, information, and maps are provided"as is" without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implies warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.

FEMA's National Flood Hazard Layer (Official)

Data from Flood Insurance Rate Maps (FIRMs) where available digitally. New NFHL FIRMette Print app available: http://tinyurl.com/j4xwp5e



National Geospatial-Intelligence Agency (NGA); Delta State University; Esri | scott.mcafee@fema.dhs.gov

SUBCONTRACTOR VERIFICATION FORM

| APPLICATION NUMBER _ | 1607 - 39 | CONTRACTOR | Krista Shepperd | PHONE |
|----------------------|-------------------|------------------|-------------------------------|-------|
| | THIS FORM MUST BE | E SUBMITTED PRIO | R 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.

| | Print Name | Signature | |
|--------------|------------|-----------|--|
| , | License #: | Phone #: | |
| MECHANICAL/ | Print Name | Signature | |
| A/C | License #: | Phone #: | |
| PLUMBING/ | Print Name | Signature | |
| GAS | License #: | Phone #: | |
| ROOFING | Print Name | Signature | |
| | License #: | Phone #: | |
| SHEET METAL | Print Name | Signature | |
| | License #: | Phone #: | |
| FIRE SYSTEM/ | Print Name | Signature | |
| SPRINKLER | License#: | Phone #: | |
| SOLAR | Print Name | Signature | |
| | License #: | Phone #: | |

| Specialty License | License Number | Sub-Contractors Printed Name | Sub-Contractors Signature |
|--------------------|----------------|--|---------------------------|
| MASON | | | |
| CONCRETE FINISHER | | 8 | |
| FRAMING | | | |
| INSULATION | | 3 | X |
| STUCCO | | | 100 |
| DRYWALL | | | |
| PLASTER | | the second secon | |
| CABINET INSTALLER | | | |
| PAINTING | | | |
| ACOUSTICAL CEILING | | -5628 | |
| GLASS | | | |
| CERAMIC TILE | | | |
| FLOOR COVERING | | 100000 | |
| ALUM/VINYL SIDING | | - 10 | |
| GARAGE DOOR | | | |
| METAL BLDG ERECTOR | | | |

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.

Contractor Forms: Subcontractor form: 6/09

Columbia County Property Appraiser

updated: 5/5/2016

2015 Tax Year

Tax Collector

Tax Estimator Property Card

Parcel List Generator

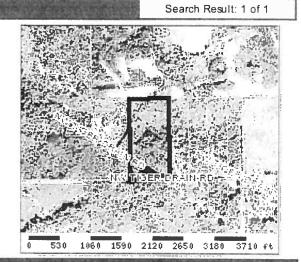
Print

Parcel: 14-2S-15-00066-002

<< Next Lower Parcel Next Higher Parcel >>

| Owner & Proper | ty Info | | |
|--------------------|---|--------------|-------|
| Owner's Name | SHEPPARD EDDIE R | & KRISTA D | |
| Mailing Address | 2415 24TH AVE WE WILLISTON, ND 588 | | |
| Site Address | | | |
| Use Desc. (code) | NO AG ACRE (0099 | 00) | |
| Tax District | 3 (County) | Neighborhood | 14215 |
| Land Area | 20.000 ACRES | Market Area | 03 |
| Description | NOTE: This description Description for this pare | | 0 |

E1/2 OF NW1/4 OF SE1/4 EX RD R/W. ORB 442-493, QC&DC 1193- 2572, (PB#14-67-CP; ORDER 1270 -2702), WD 1271-2050,



Property & Assessment Values

| 2015 Certified Values | | |
|-----------------------|----------|--|
| Mkt Land Value | cnt: (0) | \$24,720.00 |
| Ag Land Value | cnt: (1) | \$0.00 |
| Building Value | cnt: (0) | \$0.00 |
| XFOB Value | cnt: (0) | \$0.00 |
| Total Appraised Value | | \$24,720.00 |
| Just Value | | \$24,720.00 |
| Class Value | | \$0.00 |
| Assessed Value | | \$24,720.00 |
| Exempt Value | | \$0.00 |
| Total Taxable Value | Oth | Cnty: \$24,720 er: \$24,720 Schl: \$24,720 |

| 2016 Working Values | | (Hide Values) |
|-----------------------|----------|--|
| Mkt Land Value | cnt: (0) | \$24,720.00 |
| Ag Land Value | cnt: (1) | \$0.00 |
| Building Value | cnt: (0) | \$0.00 |
| XFOB Value | cnt: (0) | \$0.00 |
| Total Appraised Value | | \$24,720.00 |
| Just Value | | \$24,720.00 |
| Class Value | | \$0.00 |
| Assessed Value | | \$24,720.00 |
| Exempt Value | | \$0.00 |
| Total Taxable Value | 01 | Cnty: \$24,720 ther: \$24,720 Schl: \$24,720 |

2016 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

| Sales Histor | y | | | Show | Similar Sales w ithin | 1/2 mile |
|--------------|--------------|---------|-------------------|----------------|-----------------------|-------------|
| Sale Date | OR Book/Page | OR Code | Vacant / Improved | Qualified Sale | Sale RCode | Sale Price |
| 3/24/2014 | 1271/2050 | WD | V | Q | 01 | \$30,000.00 |
| 3/10/2014 | 1270/2702 | РВ | V | U | 18 | \$0.00 |
| 4/22/2010 | 1193/2572 | QC | V | U | 11 | \$100.00 |

| uilding Chara | ccci istics | | | THE PROPERTY AND | | |
|---------------|-------------|----------|------------|------------------|-------------|------------|
| Bldg Item | Bldg Desc | Year Blt | Ext. Walls | Heated S.F. | Actual S.F. | Bldg Value |
| | | | NONE | | T | |

| | tra Features 8 |
|--|----------------|
| Code Desc Year Blt Value Units Dims Condition (% Goo | Code Des |

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787 PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for assigning and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Service Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County.

DATE REQUESTED:

12/22/2016

DATE ISSUED:

1/7/2016

ENHANCED 9-1-1 ADDRESS:

1947

NW TIGER DRAIN RD

WHITE SPRINGS

FL 32096

PROPERTY APPRAISER PARCEL NUMBER:

14-2S-15-00066-002

Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCEL.

Address Issued By: SIGNED:/ RONAL N. CROFT

Columbia County 9-1-1 Addressing / GIS Department

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION INFORMATION BE FOUND TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.



COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21 Lake City, FL 32055

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

OWNER BUILDER DISCLOSURE STATEMENT

I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed and bonded in Florida and to list his or her license numbers on permits and contracts.

I understand that I may build or improve a one-family or two-family residence or farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased with in 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.

I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.

I understand that it is frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 850-487-1395 or Internet website address http://www.myfloridalicense.com/dbpr/for more information about licensed contractors.

I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address:

1947 NW Tiger Drain Rd White Springs for 32096

I agree to notify Columbia County Building Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure. Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual of firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

I understand that if I hire subcontractors they must be licensed for that type of work in Columbia County, ex: framing, stucco, masonry, and state registered builders. Registered Contractors must have a minimum of \$300,000.00 in General Liability insurance coverage and the proper workers' compensation. Specialty Contractors must have a minimum of \$100,000.00 in General Liability insurance coverage and the proper workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to Columbia County Building Department.

TYPE OF CONSTRUCTION

| Modulo Single Family Dwelling () Two-Family Residen | nce () Farm Outbuilding |
|--|---|
| () Addition, Alteration, Modification or other Impro | vement |
| () Commercial, Cost of Construction | for construction of |
| () Other | |
| statement for exemption from contractor licensing all requirements provided for in Florida Statutes alle permitted by Columbia County Building Permit. | as an owner/builder. I agree to comply with owing this exception for the construction |
| Must Shippand Owner Builder Signature | 5-23-16 Date |
| NOTARY OF OWNER BUILDER SIGNATURE | |
| The above signer is personally known to me or prod | luced identification |
| Notary Signature Da | LAURIE HODSON MY COMMISSION # FF 978102 EXPIRES: July 14, 2020 |
| FOR BUILDING DEPARTMENT USE ONLY | Bonded Thru Notary Public Underwriters |
| I hereby certify that the above listed owner builder stated above. Building Official/Representative | has been given notice of the restriction |
| Danama Official/Representative | manus - s |

Revised: 7-1-15 DISCLOSURE STATEMENT 15 Documents: B&Z Forms

| Application for Onsite Sewage Disposal Sy Construction Permit. Part II Site Plan Permit Application Number: | stem |
|---|----------|
| ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALT | H UNIT |
| | A |
| | NORTH |

SEE ATTACHED

1 inch = 40 feet

| Site Plan Submitted By Port Claud | Date //29/16 |
|-----------------------------------|----------------|
| Plan Approved Not Approved | Date 1314 |
| Ву | Celientra CPHU |
| Notes: | |
| | E |

CR # 10-6184

PERMIT NO. / 6-1/0

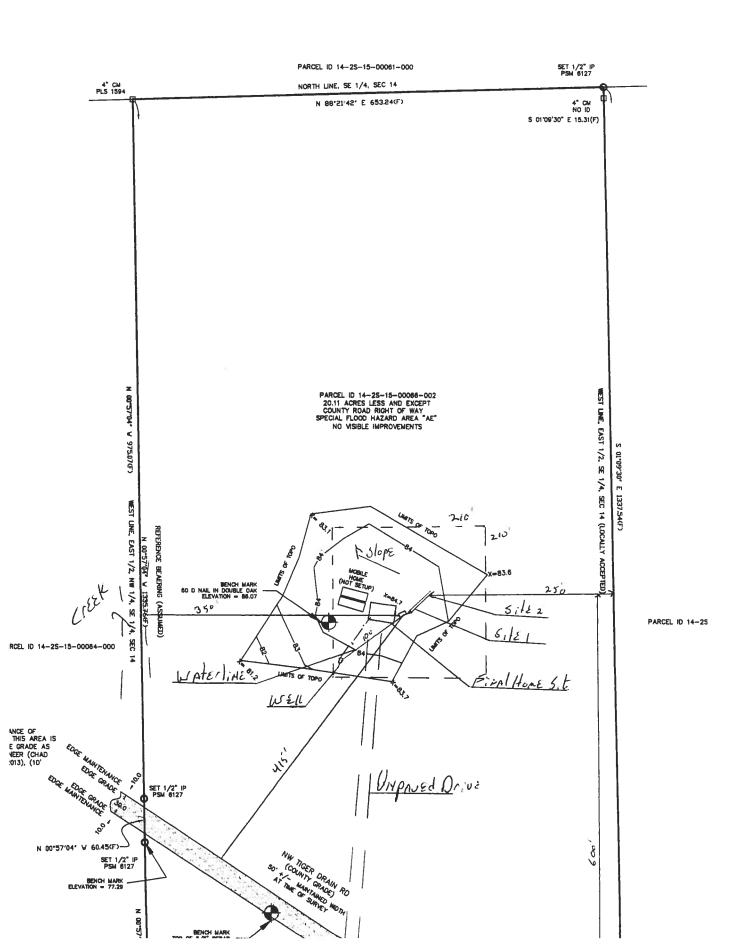


STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATME

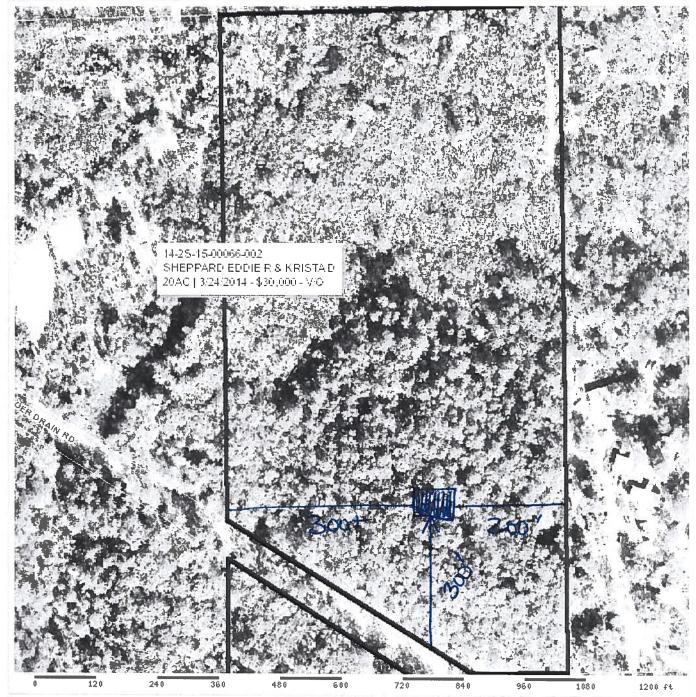
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

DATE PAID:
FEE PAID:
RECEIPT #: /

| ADDITOR | ITON TOD CONOR | DIIGHT 011 - D | | " / tazon |
|--|--------------------------------------|----------------------------|------------------------------------|--|
| APPLICATION FOR: | ION FOR CONST | RUCTION P | ERMIT | |
| [X] New System [| l Existing Sy | stem[| l Holding Tan | k [] Innovative |
| [] Repair [|] Abandonment | [|] Temporary | [] |
| APPLICANT: EDDIE & KRIST | 'A SHEPPARD | | | |
| AGENT: PAUL LLOYD- | | | | TELEPHONE: (589) 242-0711 |
| MAILING ADDRESS: 1947 NV | N TIGER DRAIN RD. | | WHITE | SPRINGS FL 32096 |
| TO BE COMPLETED BY APPL BY A PERSON LICENSED PU APPLICANT'S RESPONSIBIL PLATTED (MM/DD/YY) IF R | RSUANT TO 489.10 ITY TO PROVIDE D |)5(3)(m) OR OCUMENTATIO | 489.552, FLORII | THE LOT WAS CREATED OR |
| PROPERTY INFORMATION | | | - | |
| LOT: N/A BLOCK: N | /A SUBDIVISION | N: METES AN | D BOUNDS | PLATTED: |
| PROPERTY ID #: 14-2S-15-0 | 0066-002 | ZONIN | G: <u>AG</u> I/M | OR EQUIVALENT: [NO |
| PROPERTY SIZE: 20.000 A | CRES WATER SUPP | LY: [X] PF | IVATE PUBLIC |]<=2000GPD []>2000GF |
| | | | | |
| IS SEWER AVAILABLE AS P | ER 381.0065, FS? | [NO] | DIST | TANCE TO SEWER: N/A FT |
| PROPERTY ADDRESS: 1947 N | W TIGER DRIAN RD | . WHITE SPR | NGS LUTE | |
| DIRECTIONS TO PROPERTY: | | BEFORE SUV | ANNEE VALLY RD. VANNEE VALLY RD | TURN RIGHT ON TIGER). GOES OVER I-75) LAST |
| BUILDING INFORMATION | [X] RESIDENTIA | L [] COM | MERCIAL | |
| Unit Type of No. Establishment | No. of Bedrooms | Building Area Sqft | Commercial/Inst | titutional System Design er 64E-6, FAC |
| MOBILE HOME | 2+ | 864 | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | - | | |
| [] Floor/Equipment Dr | cains [] Other | (Specify) | | |
| SIGNATURE: | Lleyd | | | DATE: //29/16 |



Site Plan



Columbia County Property Appraiser J. Doyle Crews - Lake City, Florida 32055 | 386-758-1083

PARCEL: 14-2S-15-00066-002 - NO AG ACRE (009900)

E1/2 OF NW1/4 OF SE1/4 EX RD R/W. ORB 442-493, QC&DC 1193- 2572, (PB#14-67-CP; ORDER 1270 -2702), WD 1271-2050.

| | The state of the s | | 110 101 | 2000, |
|--|--|--------|----------------|----------------------------------|
| Name | :SHEPPARD EDDIE R & | KRISTA | D 2015 Certi | fied Values |
| Site: | | | Land | \$24,720.00 |
| Mail: 2415 24TH AVE WEST APT 205 WILLISTON, ND 58801-2531 | | Bldg | \$0.00 | |
| | | Assd | \$24,720.00 | |
| Sales | Sales 3/24/2014\$30,000.00 V/Q | Exmpt | \$0.00 | |
| Info 3/10/2014 \$0.00 V / U | V/U | Taxbl | Cnty: \$24,720 | |
| | | | rakul | Other: \$24,720 Schl: \$24,720 |





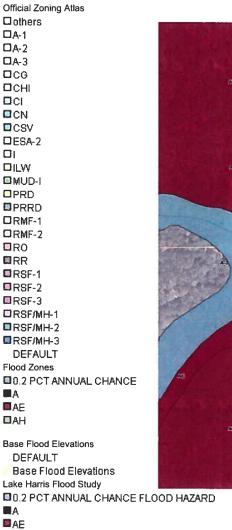
Legend

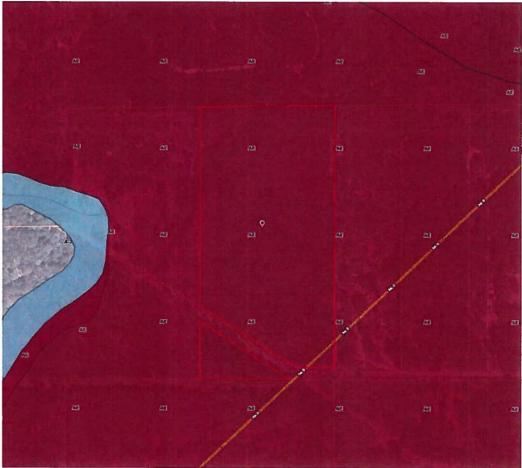
Parcels

□AH X

Columbia County, FLA - Building & Zoning Property Map

Printed: Mon May 23 2016 15:03:43 GMT-0400 (Eastern Daylight Time)





Parcel Information

Parcel No: 14-2S-15-00066-002

Owner: SHEPPARD EDDIE R & KRISTA D

Subdivision:

Lot:

Acres: 19.5390072 Deed Acres: 20 Ac

District: 1 Ronald Williams (386)-752-0158

Future Land Uses: Environmentally Sensitive Areas -1

Flood Zones: AE

Official Zoning Atlas: ESA-2

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