

10003

New App#
43684

Columbia County Swimming Pool/Spa Permit Application

For Office Use Only Application # 1907-86 Date Received 7-22-19 By UH Permit # 38707
Zoning Official L. Williams Date 7-31-19 Flood Zone X Land Use Ag Zoning A-3
FEMA Map # 24 Elevation _____ MFE _____ River _____ Plans Examiner T.C. Date 8-2-19
Comments existing home on property
☒ NOC ☐ EH ☐ Deed or PA ☐ Site Plan ☒ 11 Sheet (If NO Address Exists) ☐ Owner Builder Disclosure Statement
☐ Dev Permit # _____ ☐ In Floodway ☒ Letter of Auth. from Contractor ☐ F W Comp. letter
☐ Land Owner Affidavit ☐ Ellisville Water ☒ App Fee Paid ☒ Sub VF Form
Notes:

Septic Permit No. 19-0714 Or City Water System ☐ Fax None
Applicant (Who will sign/pickup the permit) Hubert Capps Phone 352-949-4710
Address 17255 NW 71st Ave Trenton FL 32693
Owners Name Jack and Carrie Patton Phone 386-365-0609
911 Address 9663E SW TUSTENUGGIE AVE LAKE CITY FL 32024
Contractors Name Gregory H. Elston Phone 352-400-1188
Address 1368 W Cary Dr Citrus Springs FL 34434
Contractor Email Cappsh41@gmail.com ***Include to get updates on this job.
Fee Simple Owner Name & Address agruscapepools07@yahoo.com
Bonding Co. Name & Address _____
Architect/Engineer Name & Address _____
Mortgage Lenders Name & Address _____
Circle the correct power company ☐ FL Power & Light ☒ Clay Elec. ☐ Suwannee Valley Elec. ☐ Duke Energy
Property ID Number 05-65-17-09607-101 Cost of Construction 32,400
Subdivision Name Melissas Secret Garden Lot 1 Block _____ Unit _____ Phase _____
Driving Directions 441 South to Tustenuggie Ave, 5 miles north of county Rd 18 on right

Residential ☒ OR Commercial ☐
Construction of New Inground Swimming Pool ADA Compliant _____ Total Acreage 5.01
Actual Distance of Pool from Property Lines - Front 97' Side 101'6" Side 154'0" Rear 578'0"

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.

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

UH-Spoke to Hubert 10/2/19

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 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.

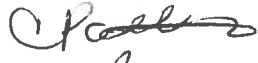

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY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

Carrie Patton
Jack Patton

Print Owners Name



Owners Signature

****Property owners must sign here before 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.**

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 including all application and permit time limitations.


Contractor's Signature

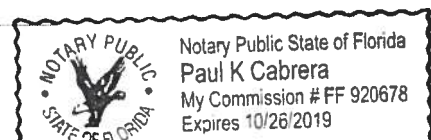
Contractor's License Number CP# 1456680
Columbia County
Competency Card Number 1983 ✓

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 23 day of April 2019.

Personally known _____ or Produced Identification FL Drive License

SEAL:

State of Florida Notary Signature (For the Contractor)





STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 19-0714
DATE PAID: 9/23/19
FEE PAID: 10000
RECEIPT #: 1484854

APPLICATION FOR:

☐ New System ☒ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☒ Pool

APPLICANT: Hubert CappsAGENT: Hubert CappsTELEPHONE: 352-949-4710MAILING ADDRESS: 17255 NW 41st Ave Trenton FL 32693

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 1 BLOCK: _____ SUBDIVISION: Melissa's Secret Gardens PLATTED: _____PROPERTY ID #: 05-65-17-09607-101 ZONING: _____ I/M OR EQUIVALENT: ☒ Y ☐ NPROPERTY SIZE: 501 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: 150 FTPROPERTY ADDRESS: 9663 SW Tustnuggie Ave Lake City FL 32024DIRECTIONS TO PROPERTY: Take Lake City toward Bt White, go to 38 go right 5 miles take a left you will be about 5 miles into Right.

BUILDING INFORMATION

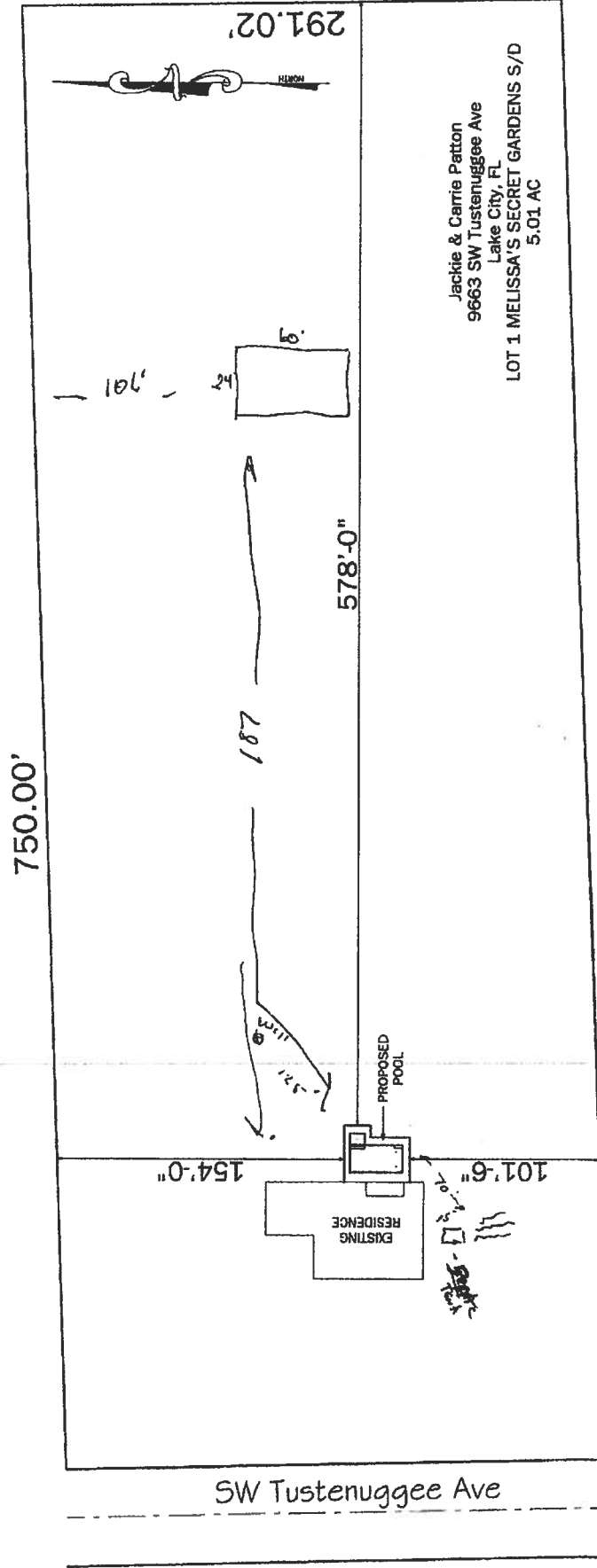
☒ RESIDENTIAL☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	Residential House	3	1200 SF	
2	Pool	10	4500 SF	
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) New Inground PoolSIGNATURE: Hubert CDATE: Oct 25, 2019

190714

19-271



SITE PLAN
SCALE: N.T.S.



GRAPHIC SCALE

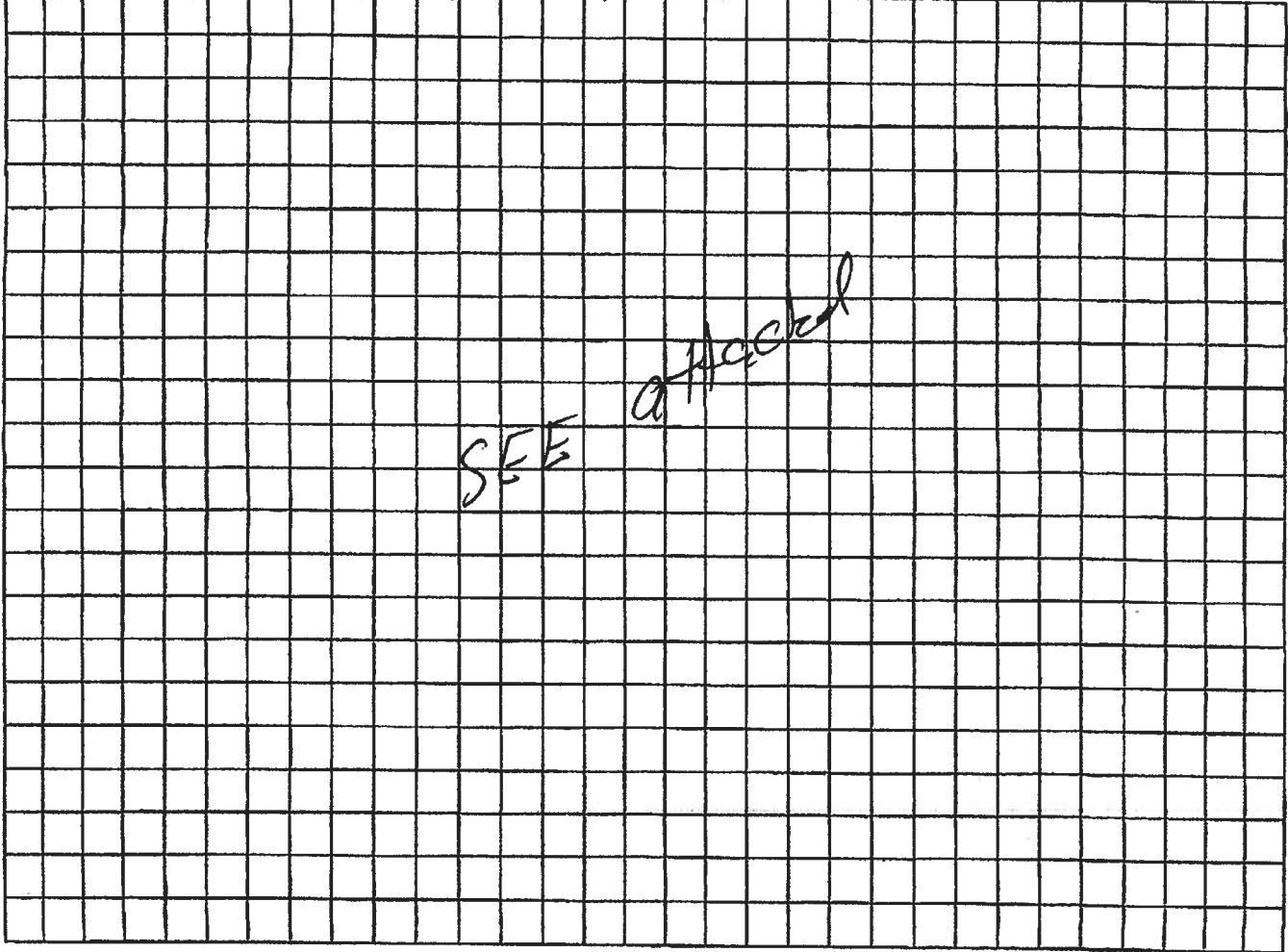
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

19-0714

----- PART II - SITEPLAN -----

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: _____

Site Plan submitted by: _____

TITLE AsstDATE: 8/29/19

Plan Approved _____

Not Approved _____

Date 9/26/19

By _____

Celan

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

05-6547-09607-101

Clerk's Office Stamp

Inst: 201912017016 Date: 07/22/2019 Time: 2:43PM
Page 1 of 1 B: 1389 P: 1504, P. DeWitt Cason, Clerk of Court
Columbia, County, By: BD
Deputy Clerk

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): Lot 1 Melissa Secret Garden Sh WO 1017.2357 WO 1-294-1829 WO 1364 2051
a) Street (Job) Address: 9663 SW Tustanupic Ave Lake City FL 32024
2. General description of improvements: New Inground Swimming Pool
3. Owner Information or Lessee information if the Lessee contracted for the improvements:
a) Name and address: Jack and Carrie Patton 9663 SW Tustanupic Ave Lake City FL 32024
b) Name and address of fee simple titleholder (if other than owner):
c) Interest in property
4. Contractor Information
a) Name and address: Greg Melton 1368 W Cary Dr Citrus Springs FL 34434
b) Telephone No.: 352-400-1188
5. Surety Information (if applicable, a copy of the payment bond is attached):
a) Name and address: N/A
b) Amount of Bond: N/A
c) Telephone No.: N/A
6. Lender
a) Name and address: N/A
b) Phone No.: N/A
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: N/A
b) Telephone No.: N/A
8. In addition to himself or herself, 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: N/A OF
b) Telephone No.: N/A
9. Expiration date of Notice of Commencement (the expiration date will be 1 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.

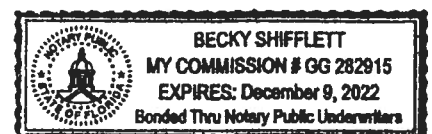
STATE OF FLORIDA
COUNTY OF COLUMBIA

10. Jack Patton CP Patton
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Jack Patton, Carrie Patton
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 28 day of JUNE, 2019, by:
JACK PATTON/CARRIE PATTON as OWNERS for
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

Personally Known ☐ OR Produced Identification ☒ Type FL DRIVER LICENSES

Notary Signature [Signature] Notary Stamp or Seal:





COLUMBIA COUNTY BUILDING DEPARTMENT

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

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

www.columbiacountyfla.com/BuildingandZoning.asp

NOTICE TO SWIMMING POOL OWNERS

I, Carrie Patton, have been informed and I understand that prior to the final inspection 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 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.

Unless 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.
- 2) Or; all doors providing direct access from the home to the pool must be equipped with a self-closing, self-latching device with a release mechanism located at least 54 inches above the floor.

According to Florida statutes chapter 515: Residential Swimming Pool Safety Act, 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.

CPatton 6/26/19
Owner Signature / Date

Address: 9463 SW Tustemuggee Ave Lake City, FL 32024

Sherry Stahl 4/22/19 CPC 145-6680
Contractor Signature / Date License Number

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # 1907-86 JOB NAME Patton

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

Columbia County issues combination permits. One permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the general contractors permit.

NOTE: It shall be the responsibility of the general contractor to make sure that all of the subcontractors are licensed with the Columbia County Building Department.

Use website to confirm licenses: <http://www.columbiacountyfla.com/PermitSearch/ContractorSearch.aspx>

NOTE: If this should change prior to completion of the project, it is your responsibility to have a corrected form submitted to our office, before that work has begun.

Violations will result in stop work orders and/or fines.

ELECTRICAL <input checked="" type="checkbox"/> CC# <u>380</u>	Print Name <u>Donald Davis</u> Signature <u>Don Davis</u> Company Name: <u>High Springs Electric</u> License #: <u>EC 0002306</u> Phone #: <u>386-623-0499</u>	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
MECHANICAL/A/C <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
PLUMBING/GAS <input checked="" type="checkbox"/> CC# <u>1983</u>	Print Name <u>Gary Helton</u> Signature <u>Gary Helton</u> Company Name: <u>Gary Scrape Pools & Spas Inc</u> License #: <u>1456680</u> Phone #: <u>352-406-1188</u>	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
ROOFING <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SHEET METAL <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
FIRE SYSTEM/SPRINKLER <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SOLAR <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
STATE SPECIALTY <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE

Columbia County Property Appraiser

Jeff Hampton

2018 Tax Roll Year

updated: 6/25/2019

Parcel: << **05-6S-17-09607-101** >>

Aerial Viewer Pictometry Google Maps

Owner & Property Info

Result: 1 of 1

Owner	PATTON JACKIE W & CARRIE A 9663 SW TUSTENUGGEE AVE LAKE CITY, FL 32024		
Site	9663 TUSTENUGGEE AVE, LAKE CITY		
Description*	LOT 1 MELISSA'S SECRET GARDENS S/D. WD 1047-2351, WD 1294- 1829, WD 1364-2051,		
Area	5.01 AC	S/T/R	05-6S-17E
Use Code**	VACANT (000000)	Tax District	3

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

2018 Certified Values		2019 Working Values	
Mkt Land (1)	\$32,784	Mkt Land (1)	\$32,784
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (0)	\$0	Building (0)	\$0
XFOB (0)	\$0	XFOB (0)	\$0
Just	\$32,784	Just	\$32,784
Class	\$0	Class	\$0
Appraised	\$32,784	Appraised	\$32,784
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$32,784	Assessed	\$32,784
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$32,784 city:\$32,784 other:\$32,784 school:\$32,784	Total Taxable	county:\$32,784 city:\$32,784 other:\$32,784 school:\$32,784

**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
7/13/2018	\$39,000	1364/2051	WD	V	Q	01
5/11/2015	\$36,000	1294/1829	WD	V	Q	01
6/2/2005	\$55,000	1047/2351	WD	V	Q	

▼ Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
NONE						

▼ Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

▼ Land Breakdown

Land Code	Desc	Units	Adjustments	Eff Rate	Land Value
000000	VAC RES (MKT)	5.010 AC	1.00/1.00 1.00/1.00	\$6,544	\$32,784

Search Result: 1 of 1

Legend

2018Aerials



2018 Flood Zones

0.2 PCT ANNUAL CHANCE



A



AE



AH

Roads

Roads

others



Dirt



Interstate



Main



Other



Paved



Private

Parcels

DevZones1



others



A-1



A-2



A-3



CG



CHI



CI



CN



CSV



ESA-2



I



ILW



MUD-1



PRD



PRRD



RMF-1



RMF-2



RO



RR



RSF-1



RSF-2



RSF-3



RSF/MH-1



RSF/MH-2

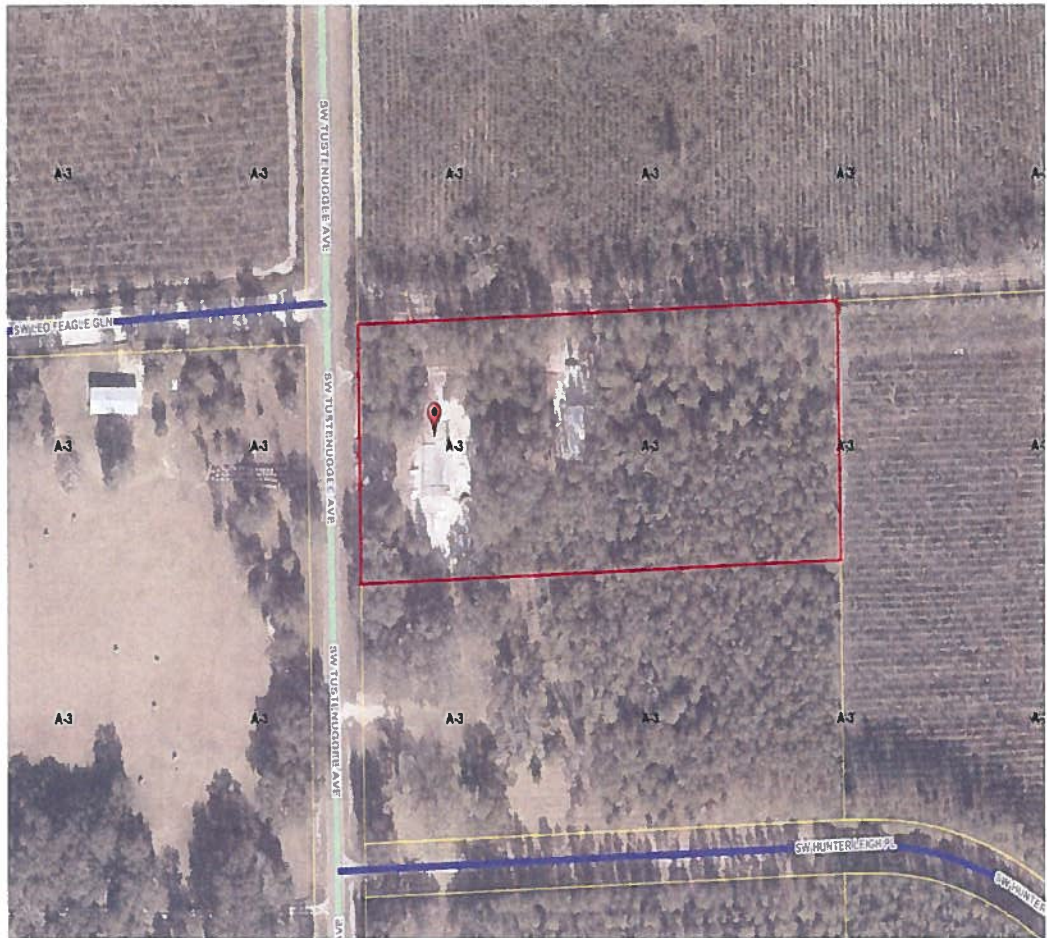


RSF/MH-3

DEFAULT

Columbia County, FLA - Building & Zoning Property Map

Printed: Wed Jul 31 2019 14:50:52 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 05-6S-17-09607-101

Owner: PATTON JACKIE W & CARRIE A

Subdivision: MELISSA'S SECRET GARDEN

Lot:

Acres: 5.01139

Deed Acres: 5.01 Ac

District: District 4 Toby Witt

Future Land Uses: Agriculture - 3

Flood Zones:

Official Zoning Atlas: A-3

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 implied 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.



COLUMBIA COUNTY BUILDING DEPARTMENT
LETTER OF AUTHORIZATION TO SIGN FOR PERMITS
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

1983

I, Gregory S Helton (license holder name), licensed qualifier
for Apex Signs, Pools & Spas Inc (company name), do certify that
the below referenced person(s) listed on this form is/are **employed** by me directly or through an
employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in
Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and
control and is/are authorized to purchase permits, call for inspections, and sign on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Herbert Capps</u>	1. <u>[Signature]</u>
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances. I understand that the State and County Licensing Boards have the power and
authority to discipline a license holder for violations committed by him/her, his/her agents,
officers, or employees and that I have full responsibility for compliance with all statutes, codes
and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you
must notify this department in writing of the changes and submit a new letter of authorization
form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to
use your name and/or license number to obtain permits.

[Signature]
License Holder's Signature (Notarized)

Cpr 1456680
License Number

Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Gregory Helton,
personally appeared before me and is known by me or has produced identification
(type of I.D.) FL Driver License on this 23 day of April, 20 19.

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)

