

DATE 08/25/2005

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000023537

APPLICANT JOSH TODD PHONE 755-4387
 ADDRESS 129 NE COLBURN AVE LAKE CITY FL 32055
 OWNER JOSH & AMANDA TODD PHONE 755-4387
 ADDRESS 285 SW ROYAL CT LAKE CITY FL 32055
 CONTRACTOR MIKE TODD PHONE 755-4387
 LOCATION OF PROPERTY 247 S, L 242, L INTO KENSINGTON S/D, LOT ON THE RIGHT

TYPE DEVELOPMENT SFD, UTILITY ESTIMATED COST OF CONSTRUCTION 103750.00
 HEATED FLOOR AREA 2075.00 TOTAL AREA 2855.00 HEIGHT 20.80 STORIES 1
 FOUNDATION CONCRETE WALLS FRAMED ROOF PITCH 7/12 FLOOR SLAB
 LAND USE & ZONING RSF-2 MAX. HEIGHT 35
 Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00
 NO. EX.D.U. 0 FLOOD ZONE XPP DEVELOPMENT PERMIT NO. _____

PARCEL ID 21-4S-16-03081-111 SUBDIVISION KENSINGTON
 LOT 11 BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES .51

00000786 _____ CGC006209 _____
 Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
 PERMIT _____ 05-0801-N _____ BK _____ N _____
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: FLOOR 1 FOOT ABOVE THE ROAD

Check # or Cash 10692

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 \$ 520.00 CERTIFICATION FEE \$ 14.28 SURCHARGE FEE \$ 14.28
 MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ _____ WASTE FEE \$ _____
 FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ 25.00 TOTAL FEE 623.56

INSPECTORS OFFICE [Signature] CLERKS OFFICE [Signature]

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."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

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

Columbia County Building Permit Application

CIC# 10692

Revised 9-23-04

For Office Use Only Application # 0568-20 Date Received 8/3/05 By JW Permit # 786/2 3537
 Application Approved by - Zoning Official BLK Date 7.08.05 Plans Examiner PKJH Date 8-10-05
 Flood Zone Xppld Development Permit N/A Zoning RSF-2 Land Use Plan Map Category RES. LOW DEV.
 Comments - NOC - ~~SEE Q1000000~~ 24' Culvert

Applicants Name Mike Todd Construction, Inc Phone 386 755 4387
 Address 129 NE Colburn Avenue, Lake City, FL 32055
 Owners Name Josh & Amanda Todd Phone 386 755 4387
 911 Address 285 SW Royal Ct, Lake City, FL 32024
 Contractors Name Mike Todd Construction, Inc Phone 386 755 4387
 Address 129 NE Colburn Avenue, Lake City, FL 32055
 Fee Simple Owner Name & Address N/A
 Bonding Co. Name & Address N/A
 Architect/Engineer Name & Address NICK GREISER, MIKE TODD, DRAFTSMAN
 Mortgage Lenders Name & Address 1st Federal - JARVIS
 Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Energy
 Property ID Number 21-45-16-03081-111 Estimated Cost of Construction 197,700
 Subdivision Name Horsington Lot 11 Block - Unit - Phase -
 Driving Directions Hwy 247 to CR 242 - Turn left - S/O on left - Lot on right

Type of Construction residential (new) Number of Existing Dwellings on Property 0
 Total Acreage .5184 Lot Size _____ Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
 Actual Distance of Structure from Property Lines - Front 45 ✓ Side 45 ✓ Side 34.24 ✓ Rear 51.65 ✓
 Total Building Height 20'8" Number of Stories 1 Heated Floor Area 2075 Roof Pitch 7/12
PORCHES 260 GARAGE 520 TOTAL 2855

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.
 OWNERS AFFIDAVIT: 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.
WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Owner Builder or Agent (Including Contractor)
 STATE OF FLORIDA
 COUNTY OF COLUMBIA
 Sworn to (or affirmed) and subscribed before me
 this 3rd day of AUG 2005.
 Personally known ✓ or Produced Identification _____

Contractor Signature _____
 Contractors License Number CG1C0006209
 Competency Card Number _____
 NOTARY STAMP/SEAL
 MY COMMISSION EXPIRES: June 28, 2009
 Bonded Thru Notary Public Underwriters
 Notary Signature _____

DEMO.RPT

[Handwritten Signature]
COLUMBIA COUNTY
9-1-1 ADDRESSING
APPROVED

0

LOCATION ALREADY ADDRESSED

STR	PARCEL_I	ADDRESS
0214s16	03081-111	285 SW ROYAL CT

1 records selected.

UB-UB-2U- W 41

THIS INSTRUMENT WAS PREPARED BY:
TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

RETURN TO:
TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

Inst:2004007807 Date:04/08/2004 Time:14:47
Doc Stamp-Deed : 262.50
DC, P, Dewitt Cason, Columbia County B:1011 P:2331

Property Appraiser's
Parcel Identification No.: R03081-101, R03081-111 & R03081-113

WARRANTY DEED

THIS INDENTURE, made this 17th day of March, 2004, between WOODMAN PARK BUILDERS, INC., a corporation existing under the laws of the State of Florida, whose post office address is Post Office Box 3535, Lake City, FL 32056 and having its principal place of business in the County of Columbia, State of Florida, party of the first part, and FRANK A. TODD, REBECCA E. TODD and JOSHUA M. TODD, as joint tenants with full right of survivorship, whose post office address is Route 8, Box 465, Lake City, FL 32055, of the County of Columbia, State of Florida, parties of the second part,

WITNESSETH: that the said party of the first part, for and in consideration of the sum of Ten Dollars (\$10.00), to it in hand paid, the receipt whereof is hereby acknowledged, has granted, bargained, sold, aliened, remised, released, conveyed and confirmed, and by these presents doth grant, bargain, sell, alien, remise, release, convey and confirm unto the said party of the second part, and its heirs and assigns forever, all that certain parcel of land lying and being in the County of Columbia and State of Florida, more particularly described as follows:

Lots 1, 11 and 13, KENSINGTON, a subdivision according to the plat thereof as recorded in Plat Book 6, Pages 193 and 194 of the public records of Columbia County, Florida.

SUBJECT TO: Restrictions, easements and outstanding mineral rights of record, if any, and taxes for the current year.

Inst:2004007807 Date:04/06/2004 Time:14:47

Doc Stamp-Deed : 262.50

DC, P. DeWitt Cason, Columbia County B:1011 P:2332

TOGETHER with all the tenements, hereditaments and appurtenances, with every privilege, right, title, interest and estate, reversion, remainder and easement thereto belong or in anywise appertaining:

TO HAVE AND TO HOLD the same in fee simple forever.

And the said party of the first part doth covenant with said party of the second part that it is lawfully seized of said premises; that they are free of all encumbrances, and that it has good right and lawful authority to sell the same; and the said party of the first part does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

IN WITNESS WHEREOF, the party of the first part has caused these presents to be signed in its name by its President, and its corporate seal to be affixed, the day and year above written.

Signed, sealed and delivered in our presence:

WOODMAN PARK BUILDERS, INC.

Lisa C. Ogburn
Lisa C. Ogburn

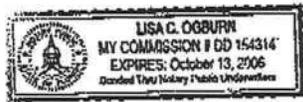
By William G. Wood
WILLIAM G. WOOD, President

Crystal L. Brunner
Crystal L. Brunner

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 17th day of March, 2004, by WILLIAM G. WOOD, as President of WOODMAN PARK BUILDERS, INC., a State of Florida corporation, on behalf of the corporation. He is personally known to me and did not take an oath.

Lisa C. Ogburn
Notary Public
My Commission Expires: _____



Compliance with Method B Chapter 6 of the Florida Energy Efficiency Code may be demonstrated by the use of Form 600B for single and multifamily residences of 3 stories or less in height, and additions to existing residential buildings. To comply, a building must meet or exceed all of the energy efficiency prescriptives in any one of the prescriptive component packages and comply with the prescriptive measures listed in Table 6B-1 of this form. An alternative method is provided for additions of 600 square feet or less by use of Form 600C. If a building does not comply with this method, it may still comply under other sections in Chapter 6 of the Code.

PROJECT NAME: AND ADDRESS:	Todd, Josh / Amanda	BUILDER:	MIKE Todd Construction Inc
OWNER:	Todd, Josh / Amanda	PERMITTING OFFICE:	
		PERMIT NO.:	
		CLIMATE ZONE:	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>
		JURISDICTION NO.:	

GENERAL DIRECTIONS

1. New construction including additions which incorporates any of the following features cannot comply using this method: steel stud walls, single assembly roof/ceiling construction, or skylights or other non-vertical roof glass.
2. Choose one of the component packages "A" through "E" from Table 6B-1 by which you intend to comply with the Code. Circle the column of the package you have chosen.
3. Fill in all the applicable spaces of the "To Be Installed" column on Table 6B-1 with the information requested. All "To Be Installed" values must be equal to or more efficient than the required levels.
4. Complete page 1 based on the "To Be Installed" column information.
5. Read "Minimum Requirements for All Packages", Table 6B-2 and check each box to indicate your intent to comply with all applicable items.
6. Read, sign and date the "Prepared By" certification statement at the bottom of page 1. The owner or owner's agent must also sign and date the form.

1. Compliance package chosen (A-F)
2. New construction or addition
3. Single family detached or Multifamily attached
4. If Multifamily—No. of units covered by this submission
5. Is this a worst case? (yes / no)
6. Conditioned floor area (sq. ft.)
7. Predominant eave overhang (ft.)
8. Glass type and area :
 - a. Clear glass
 - b. Tint, film or solar screen
9. Percentage of glass to floor area
10. Floor type, area or perimeter, and insulation:
 - a. Slab on grade (R-value)
 - b. Wood, raised (R-value)
 - c. Wood, common (R-value)
 - d. Concrete, raised (R-value)
 - e. Concrete, common (R-value)
11. Wall type, area and insulation: (ICYNENE)
 - a. Exterior: 1. Masonry (Insulation R-value)
2. Wood frame (Insulation R-value)
 - b. Adjacent: 1. Masonry (Insulation R-value)
2. Wood frame (Insulation R-value)
12. Ceiling type, area and insulation: (ICYNENE)
 - a. Under attic (Insulation R-value)
 - b. Single assembly (Insulation R-value)
13. Air Distribution System: Duct insulation, location
Test report (attach if required)
14. Cooling system
(Types: central, room unit, package terminal A.C., gas, none)
15. Heating system:
(Types: heat pump, elec. strip, nat. gas, L.P. gas, gas h.p., room or PTAC, none)
16. Hot water system:
(Types: elec., nat. gas, L.P. gas, solar, heat rec., ded. heat pump, other, none)

Please Print		CK
1.	A	
2.	NEW CONST.	
3.	SINGLE FAMILY	
4.	NO	
5.	NO	
6.	2075	
7.	2	
	Single Pane	Double Pane
8a.	_____ sq. ft.	277 sq. ft.
8b.	_____ sq. ft.	_____ sq. ft.
9.	13 %	
10a.	R= 0	_____ lin. ft.
10b.	R= _____	_____ sq. ft.
10c.	R= _____	_____ sq. ft.
10d.	R= _____	_____ sq. ft.
10e.	R= _____	_____ sq. ft.
11a-1	R= 8	483 sq. ft.
11a-2	R= 13	1631 sq. ft.
11b-1	R= _____	_____ sq. ft.
11b-2	R= _____	_____ sq. ft.
12a.	R= 22	2407 sq. ft.
12b.	R= _____	_____ sq. ft.
13.	R= _____	
14a.	Type: CENTRAL	
14b.	SEER/EER: 12.0	
14c.	Capacity: 3.5 TON	
15a.	Type: Heat Pump	
15b.	HSPF/COP/AFUE:	
15c.	Capacity: 420k	
16a.	Type: Elect	
16b.	EF: .88	

I hereby certify that the plans and specifications covered by the calculation are in compliance with the Florida Energy Code. PREPARED BY: <u>[Signature]</u> DATE: <u>7/28/05</u> I hereby certify that this building, as designed, is in compliance with the Florida Energy Code. OWNER AGENT: <u>[Signature]</u> DATE: <u>7/28/05</u>	Review of plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed, this building will be inspected for compliance in accordance with Section 553.908, F.S. BUILDING OFFICIAL: _____ DATE: _____
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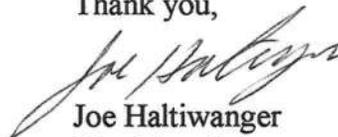
From: The Columbia County Building Department
Plans Review
135 NE Hernando Av.
P. O Box 1529
Lake City Florida, 32056-1529

Reference to: Build permit application Number: **0508-20 Mike Todd**
Construction/ Josh Todd Lot 11 of
Kensington Subdivision.

On the date of August 9, 2005 application 0508- 20 and plans for construction of a single family dwelling were reviewed and the following information or alteration to the plans will be required to continue processing this application. If you should have any question please contact the above address, or contact phone number (386) 758-1163 or fax any information to (386) 754-7088. **Please include application number 0508-20 when making reference to this application.**

- OK* 1. Please provide notice of commencement required before any inspections will be done.
- OK* 2. Please provide an area square footage summary for the dwelling.
- OK* 3. Show on the compliance summary the method of bracing the end truss system and the gable end the showing balloon framing detail or gable truss and wall hinge bracing detail.
- OK* 4. Show on the plans the header callout for all door and window opening in the exterior wall as required in section 2308.3 of the FBC by using table 2308.3A-2308.3C. include the garage door header and the rear porch supporting headers.
- OK* 5. On the electrical plan include the location of the electrical panel and include the amperage rating of the electrical panel.

Thank you,



Joe Haltiwanger
Plan Examiner
Columbia County Building & Zoning
Department

23537

Columbia County Building Department Culvert Permit

Culvert Permit No. 000000786

DATE 08/25/2005 PARCEL ID # 21-4S-16-03081-111
 APPLICANT JOSH TODD PHONE 755-4387
 ADDRESS 129 NE COLBURN AVE LAKE CITY FL 32055
 OWNER JOSH & AMANDA TODD PHONE 755-4387
 ADDRESS 285 SW ROYAL CT LAKE CITY FL 32055
 CONTRACTOR MIKE TODD PHONE 755-4387
 LOCATION OF PROPERTY 247 S, L 242, L INTO KENSINGTON LOT ON THE RIGHT

SUBDIVISION/LOT/BLOCK/PHASE/UNIT KENSINGTON 11

SIGNATURE 

INSTALLATION REQUIREMENTS

Culvert size will be 18 inches in diameter with a total length of 32 feet, leaving 24 feet of driving surface. Both ends will be mitered 4 foot with a 4 : 1 slope and poured with a 4 inch thick reinforced concrete slab.

INSTALLATION NOTE: Turnouts will be required as follows:

- a) a majority of the current and existing driveway turnouts are paved, or;
- b) the driveway to be served will be paved or formed with concrete.

Turnouts shall be concrete or paved a minimum of 12 feet wide or the width of the concrete or paved driveway, whichever is greater. The width shall conform to the current and existing paved or concreted turnouts.

Culvert installation shall conform to the approved site plan standards.

Department of Transportation Permit installation approved standards.

Other THE S/D IS APPROVED FOR 24' CULVERTS WTH MITERED ENDS

ALL PROPER SAFETY REQUIREMENTS SHOULD BE FOLLOWED
DURING THE INSTALATION OF THE CULVERT.

135 NE Hernando Ave., Suite B-21
Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

Amount Paid 25.00



THIS INSTRUMENT WAS PREPARED BY:
FIRST FEDERAL SAVINGS BANK OF FLORIDA
4705 WEST U.S. HIGHWAY 90
P.O. BOX 2029
LAKE CITY, FLORIDA 32056

23537

Inst:2005020254 Date:08/19/2005 Time:12:54
mk DC,P.DeWitt Cason,Columbia County B:1055 P:2014

PERMIT NO. _____

TAX FOLIO NO. _____

NOTICE OF COMMENCEMENT

STATE OF FLORIDA
COUNTY OF COLUMBIA

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. Description of property: Lot 11, KENSINGTON, a subdivision according to the plat thereof as recorded in Plat Book 6, Pages 193 and 194 of the public records of Columbia County, Florida.
2. General description of improvement: **Construction of Dwelling**
3. Owner information:
 - a. Name and address: JOSHUA M. TODD and AMANDA L. TODD
148 SW Donald Court, Lake City, FL 32024
 - b. Interest in property: **Fee Simple**
 - c. Name and address of fee simple title holder (if other than Owner): **NONE**
4. Contractor (name and address): MIKE TODD CONSTRUCTION
129 NE Colburn Ave., Lake City, FL 32055
5. Surety:
 - a. Name and address: _____
 - b. Amount of bond: _____
6. Lender: **FIRST FEDERAL SAVINGS BANK OF FLORIDA**
4705 WEST U.S. HIGHWAY 90
P. O. BOX 2029
LAKE CITY, FLORIDA 32056
7. Persons within the State of Florida designated by Owner upon whom notices or other document may be served as provided by Section 713.13 (1) (a) 7., Florida Statutes: **NONE**
8. In addition to himself, Owner designates **PAULA HACKER of FIRST FEDERAL SAVINGS BANK OF FLORIDA, 4705 West U.S. Highway 90 / P. O. Box 2029, Lake City, Florida 32056** to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.
9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified).

STATE OF FLORIDA, COUNTY OF COLUMBIA
I HEREBY CERTIFY, that the above and foregoing
is a true copy of the original filed in this office
P. DeWITT CASON, CLERK OF COURTS

By: Maul Keen
Deputy Clerk
Date: 8-19-05



Joshua M. Todd
JOSHUA M. TODD
Amanda L. Todd
AMANDA L. TODD

State of Florida
County of Columbia

The foregoing instrument was acknowledged before me this 17th day of August, 2005 by JOSHUA M. TODD and AMANDA L. TODD, Husband and Wife, who are personally known to me and who did not take an oath.

Notary Public:



GENERAL PUBLIC WORKS

OPEN

OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 21-4S-16-03081-111

Building permit No. 000023537

Use Classification SFD, UTILITY

Fire: 41.44

Permit Holder MIKE TODD

Waste: 85.75

Owner of Building JOSH & AMANDA TODD

Total: 127.19

Location: 285 SW ROYAL COURT(KENSINGTON, LOT 11)

Date: 03/07/2006

Harry Dickel

Building Inspector



POST IN A CONSPICUOUS PLACE
(Business Places Only)

Weggie

**Columbia County Building Department
Culvert Waiver**

**Culvert Waiver No.
000000786**

DATE: 02/21/2006

BUILDING PERMIT NO. 23537

APPLICANT JOSH TODD

PHONE 755-4387

ADDRESS 129 NE COLBURN AVE

LAKE CITY

FL 32055

OWNER JOSH & AMANDA TODD

PHONE 755-4387

ADDRESS 285 SW ROYAL CT

LAKE CITY

FL 32055

CONTRACTOR MIKE TODD

PHONE 755-4387

LOCATION OF PROPERTY 247 S, L 242, L INTO KENSINGTON LOT ON THE RIGHT

SUBDIVISION/LOT/BLOCK/PHASE/UNIT KENSINGTON

11

PARCEL ID # 21-4S-16-03081-111

I HEREBY CERTIFY THAT I UNDERSTAND AND WILL FULLY COMPLY WITH THE DECISION OF THE COLUMBIA COUNTY PUBLIC WORKS DEPARTMENT IN CONNECTION WITH THE HEREIN PROPOSED APPLICATION.

SIGNATURE: [Signature]

A SEPARATE CHECK IS REQUIRED
MAKE CHECKS PAYABLE TO BCC

Amount Paid 50.00

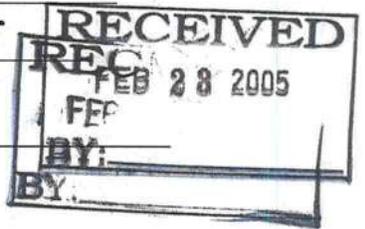
PUBLIC WORKS DEPARTMENT USE ONLY

I HEREBY CERTIFY THAT I HAVE EXAMINED THIS APPLICATION AND DETERMINED THAT THE CULVERT WAIVER IS:

APPROVED NOT APPROVED - NEEDS A CULVERT PERMIT

COMMENTS: No Culvert Needed
New Drive way To Serve at Ditch Bk

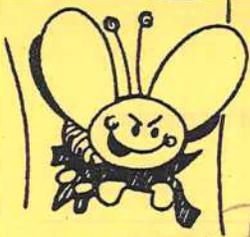
SIGNED: [Signature] DATE: 02-24-06



ANY QUESTIONS PLEASE CONTACT THE PUBLIC WORKS DEPARTMENT AT 386-752-5955.

135 NE Hernando Ave., Suite B-21
Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160





Noling Pest Control

Cory Noling, Owner
Phone (386)454-3888
16782 N.W. SR 45 (32643)
P.O. Box 949 (32655)
High Springs, Florida

GRAPH AND SPECIFICATIONS

23537

BUYER'S NAME Josh Todd SELLER'S NAME _____ DATE 9-9-07

INSPECTION ADDRESS Kensington Est CITY Lake City STATE FL ZIP _____

BUSINESS PHONE _____ HOME PHONE _____ INSPECTED BY: Cory Noling

Scale Used: _____ Well: Yes No How close to house? _____ ft. Additions? Yes No Access? _____

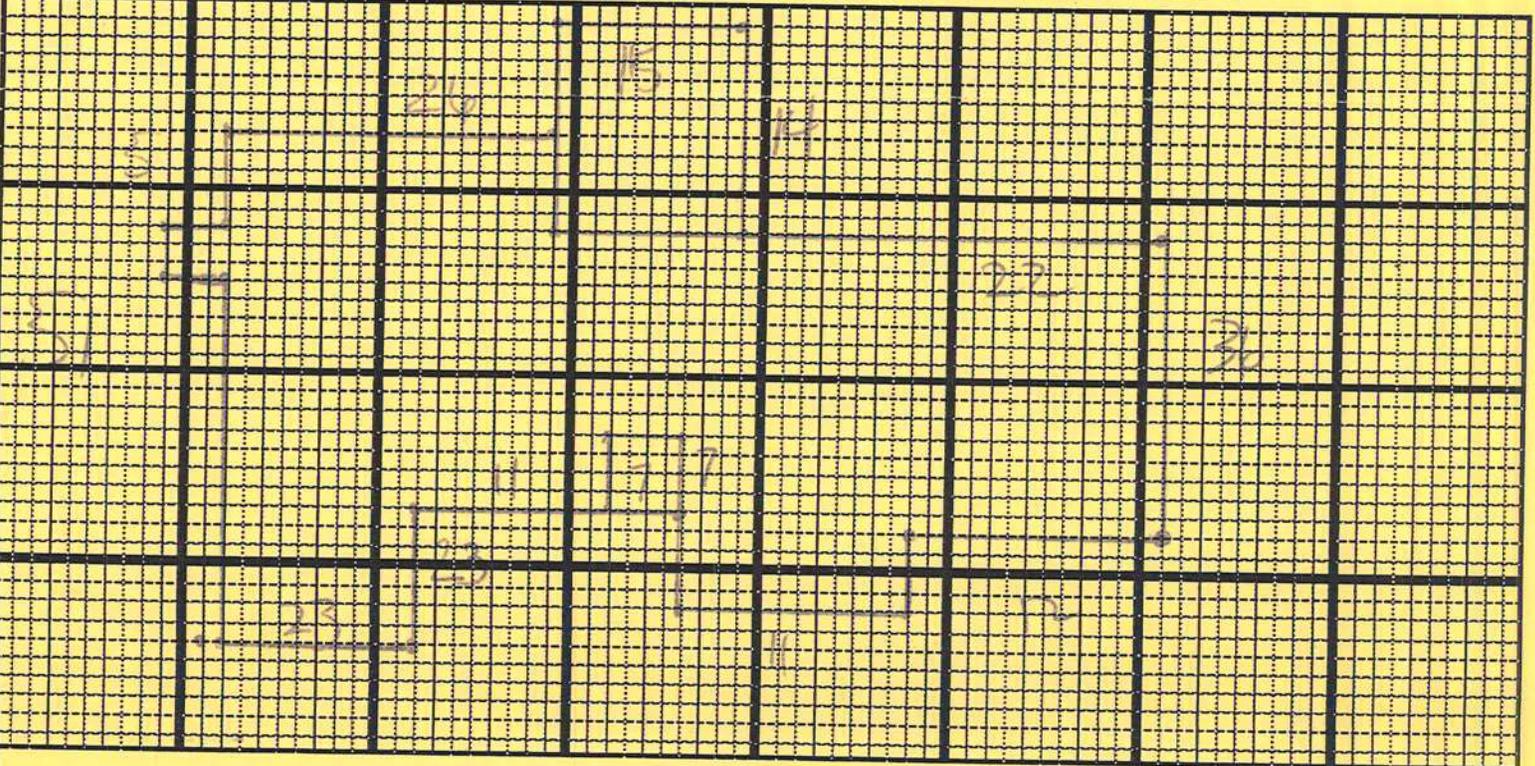
Additional specifications and comments: Terminator 80 WG Soil treatment +
Graph not to scale

Lineal Footage: _____ Square Footage: 2805 sq ft Contract Price: _____

Type Foundation: Floating Slab Supported Slab Monolithic Slab Crawl Basement Type Construction: CBS Woodframe Brick

Type Infestation Key	Location Key		General Conditions		
	F - Front	R - Right	L - Left	RE - Rear	C - Center
T - Subterranean Termite Activity	Infested Area		Type	Location	Stucco below grade? Yes <input type="checkbox"/> No <input type="checkbox"/>
D - Drywood Termite Activity	<input type="checkbox"/> Sills / Joists				Are Termites swarming? Yes <input type="checkbox"/> No <input type="checkbox"/>
ST - Suspected Termite Activity	<input type="checkbox"/> Sub Floor				Wood supports on ground? Yes <input type="checkbox"/> No <input type="checkbox"/>
P - Powder Post Beetles	<input type="checkbox"/> Finished Floor				Proper clearance for treating? Yes <input type="checkbox"/> No <input type="checkbox"/>
W - Wood Borers	<input type="checkbox"/> Walls, Studs, Plates				Make A3 access opening? Yes <input type="checkbox"/> No <input type="checkbox"/>
M - Moisture Condition	<input type="checkbox"/> Interior Trim				Electricity available? Yes <input type="checkbox"/> No <input type="checkbox"/>
F - Wood Decaying Fungi	<input type="checkbox"/> Paneled Wall				Bath trap opening? Yes <input type="checkbox"/> No <input type="checkbox"/>
X - Damage Present	<input type="checkbox"/> Door/Window Frame				Shrubbery Light <input type="checkbox"/> Heavy <input type="checkbox"/>
... - Vertical Drill Location	<input type="checkbox"/> Furniture/Cabinets				Type Floor Covering: _____
	<input type="checkbox"/> Attic				Other: _____
	<input type="checkbox"/> Roof				_____

VISIBLE DAMAGE WHICH EXISTS AT THE TIME OF THE INSPECTION IS DESIGNATED BY AN "X"



Notice of Inspection and/or Treatment

23537

Date of Inspection

9-9-05

Date of Treatment

Terminox 800G

Pesticide Used

Square Feet Sprayed

(Subs) Salt treatment

Wood-Destroying Organism Treated

Pursuant to Chapter 482, Florida Statutes, 482.226(6), this notice is required to be posted. Any licensee who performs control of any wood-destroying organism shall post notice of said treatment immediately adjacent to the access to the attic or crawl area or other readily accessible area of the property treated.



Noling Pest Control

Phone 386-454-3888

16732 NW SR 45

P.O. Box 949 High Springs, FL 32655